

The death of a mother in adolescence.

**A qualitative study of the perceived impact on a
woman's adult life and the parent she becomes.**

by

Rachael J. Hardman

**Dissertation submitted to the University of Chester for the Degree
of Master of Arts (Clinical Counselling) in part fulfilment of the
Modular Program in Clinical Counselling**

October 2019

Abstract

Master of Arts in Clinical Counselling

The death of a mother in adolescence.

A qualitative study of the perceived impact on a woman's adult life and the parent she becomes.

Aim: The purpose of this research was to explore the lived experience and meaning of the unique stories of women who had been bereaved of their mothers during their adolescence. The objective: to develop and enhance an understanding of the perceived impact on their adult life and subsequent approach to motherhood.

Method: This qualitative study was conducted by using semi-structured interviews with four participants, all of whom were mothers and over forty years of age to allow for retrospect. Data was analysed using Interpretive Phenomenological Analysis.

Findings: The study revealed five main themes, all with striking similarity amongst participants. The findings indicated that the effect of mother death in adolescence was influenced by contextual factors such as suppression of grief through silence and behaviour of surviving parent. All participants reported an enduring psychological effect from their experience; an enduring sense of hurt; feelings of low self-esteem; anger; insecurity; anxiety; neediness and chronic sorrow for both themselves and their mothers. Sadness stemmed from continuous mourning felt through the loss of an adult relationship with their mothers and an awareness of having lost an aspect of themselves. The study identified a 'ripple effect' to future generations and established an effect on parenting, with mothers identifying themselves as anxious, uncertain, protective and over compensatory. The study also highlighted facets of posttraumatic growth. Aspects of their healing process were described by participants, including a felt sense of continuing connection with their mothers. All participants believed that they had developed positive character traits as a result of their loss, such as strength and empathy. Furthermore, with age and motherhood, participants experienced an enhanced awareness and self-understanding which afforded them some comfort.

Conclusion: This work contributes to growing research suggesting 'particular effect' of mother death in adolescence and the subsequent impact on motherhood. Through participants' words this research details how this experience shaped their lives and reiterates the enormity of loss and its ripple effect. Through the distinct similarities of participant responses, it affirms this phenomenon which has significance not only for women bereaved of their mothers in adolescence but for counsellors' understanding of this phenomenon.

Declaration

The material being presented for examination is my own work and has not been submitted for an award of this or another HEI except in minor particulars which are explicitly noted in the body of the dissertation. Where research pertaining to the dissertation was undertaken collaboratively, the nature and extent of my contribution has been made explicit.

I confirm that this dissertation is entirely my own work.

Signed:

.....

Dated:

.....

Acknowledgements

I would like to express my sincere gratitude to:

The four participants who gave their time to take part in this research, who shared their memories, thoughts and (often painful) feelings of how the death of their mothers had impacted their adult lives and the mothers they had become.

Dr. Rita Mintz, my dissertation supervisor, for her kindness, encouragement and guidance.

My wonderful husband Steve, who has shown such patience and support and my children Rebekka and Sam, lights of my life.

My inspirational father.











Dedicated to:

My mother,


Anne Hardman.

Table of Contents

❖ Abstract	page ii
❖ Declaration	page iii
❖ Acknowledgements	page iv
❖ List of abbreviations	page vii
❖ List of illustrations and tables	page vii
❖ Chapter 1: Introduction	page 1
❖ Chapter 2: Literature Review	page 3
2.1. Statistics and overview	page 3
2.2. Death, grief and bereavement	page 5
2.3. Mediating factors	page 6
2.3.1. Relationship	page 7
2.3.2. Life stage	page 8
2.3.3. Support	page 11
2.4. Secondary losses	page 13
2.5. Enduring effects	page 14
2.5.1. Life perspective	page 15
2.5.2. Identity	page 17
2.5.3. Relationships	page 17
2.5.4. Parenting	page 18
2.5.5. Positive aspects	page 20
❖ Chapter 3: Methodology	page 22
3.1. Research design	page 22
3.2. Interpretive Phenomenological Analysis (IPA)	page 22
3.3. Sampling and recruitment	page 23
3.4. Criteria and rationale	page 23

3.5. Data collection	page 25
3.6. Data analysis	page 27
3.7. Validity and trustworthiness	page 28
3.8. Limitations	page 29
3.9. Ethical considerations	page 30
❖ Chapter 4: Findings	page 33
4.1. Introduction	page 33
4.2. Table of super-ordinate themes	page 33
4.3. Mediating factors	page 34
4.4. Psychological consequences	page 37
4.5. Non-finite loss	page 45
4.6. Parenting	page 49
4.7. Positive aspects	page 52
❖ Chapter 5: Discussion of Findings	page 59
❖ Chapter 6: Conclusion and recommendations	page 68
❖ References	page 71
❖ Appendices	
 Appendix 1: Advert for participants	page 87
 Appendix 2: Information sheet	page 88
 Appendix 3: Inclusion criteria	page 91
 Appendix 4: Consent form	page 92
 Appendix 5: Interview questions	page 93
 Appendix 6: Examples of first level of analysis	page 94
 Appendix 7: Connecting themes for each participant	page 98
 Appendix 8: Master table of potential themes for group	page 106
 Appendix 9: Compendium of quotes for potential themes	page 108
 Appendix 10: Final master table of themes for the group	page 124

Abbreviations

 Interpretive phenomenological analysis: IPA

Illustrations and tables

3.4.1. Table of inclusion criteria	page 24
3.8.1. Table of limitations	page 30
3.9.1. Table of ethical considerations	page 31
4.2. Table of super-ordinate themes	page 33
Box 4.3. Mediating factors	page 34
Box 4.4. Psychological consequences	page 37
Box 4.5. Non-finite loss	page 45
Box 4.6. Parenting	page 49
Box 4.7. Positive aspects	page 52
4.8. Master table of themes for the group	page 57

Chapter 1:

Introduction

The impact of parental loss is profound (Abrams, 2013) and may have serious negative impact on children's psychological and physical health (Rostila, 2015). Much quantitative research exists regarding lifetime effect of parental death in childhood suggesting that early parental loss continues to influence mental and physical wellbeing throughout life (Hollingshaus & Smith, 2015; Marks, Jun, Song, 2007). However, there is little qualitative emphasis on the phenomenological aspect of adult's perceptions of how loss has shaped them throughout the ensuing years. Less still is known about how *adolescent* parental bereavement influences later life, particularly *mother* death.

'Mother death' is a non-normative life change in adolescence, and enduring effects can present significant obstacles during this adjustment to adulthood (Balk, 2000; Meshot & Leitner, 1993; Schultz, 2007). Furthermore, Abrams (2013, p. 132) indicates that same sex parent loss may be "especially problematic"; the lasting legacy of a mother's death is potentially transformative. According to Edelman (2014), a defining characteristic of a woman's identity, her life informed forever by that loss (Silverman, 2000; Tracey, 2011). Grief may be viewed as a continuing process, and with maturity comes a changing understanding and perspective on what was lost. A woman's experience of mother death may continue to be an "issue" throughout life: grief lingers as the evolving meaning of that loss is 'renegotiated' at each life stage (Silverman, 2000). Ripples of loss extend beyond the immediate world, where the lack of a role model potentially shapes the mother the woman becomes (Edelman, 2014; Tracey, 2011).

Loss of a mother for an adolescent girl is a particular loss. Although each experience is unique, Pearce (2011) suggests there may be commonalities that cut across culture, class and religion. I experienced the death of my mother at sixteen years of age and have felt a sense

of aloneness and 'pockets' of enduring sadness but had no comprehension or words for my feelings as a younger woman. This has changed as I have aged and with the birth of my own children, yet, the grief, although less intense, and the sense of 'missing' continues. With this, I feel an inner strength, resilience and empathy for others that may also stem from experiencing early loss. Now, later in life, self-awareness and understanding this phenomenon; who, and *why* I am, how events changed and formed me, has been both validating and liberating. My mother's death during adolescence, the surrounding circumstances and secondary losses shaped my life. This has led to my interest and desire to contribute to the understanding of women who have experienced such a bereavement and to enhance counsellors' awareness of the complexity of this loss, appreciate its non-finiteness, thus, enabling them to empathically 'accompany' the client.

This study addressed womens' perceptions of the effects of loss (by death) of their mothers during adolescence. It investigated if women consider this loss to have enduring effects on their adult life, what their considered impact may be, and if so, does that extend to their approach to parenthood and becoming mothers themselves. Through a qualitative approach, using interpretive phenomenological analysis (IPA), participants experiences are explored, and what may have hindered or helped their process is examined along with any perceived positive outcomes arising from their experiences (Finlay, 2015). It is believed that there is opportunity for a deeper understanding of this experience (Smith, Flowers & Larkin, 2009).

Chapter 2:

Literature Review

It is important to place this research in context and examine relevant material, but due to word limitation, the extent of explored literature is restricted. However, the following review gives a statistical overview of the subject and outline of death, grief and some theoretical approaches to bereavement. Next, consideration is given to mediating factors and secondary losses. Thereafter, enduring effect from mother loss in adolescence is addressed, with emphasis on identity, life view, relationships, parenting and positive outcome.

Relevant literature was obtained through extensive exploration. My study title was used to scour data bases. Both texts and journals were used, and key words used for in depth searches were, 'mother death', 'mother loss', 'adolescent grief', 'long-term effect'.

2.1 Statistics and overview

In the United Kingdom, 55 people under age 18 are bereaved of a parent every day (Ellis & Lloyd-Williams, 2008) and by age 16, over 5% of children have been affected by parental death (Parsons, 2011; Elliot & Shepherd, 2006). The death of a parent is a stressful and traumatic form of childhood adversity (Luecken & Roubinov, 2012; Abrams, 2013); its impact profound and associated with significant consequences that may have a far reaching negative impact upon wellbeing (Harris, 1995; Rostila, 2015).

Quantitative research abounds regarding effects of parental death in childhood, presenting both short and long term impact, suggesting enduring change in individuals (Hollingshaus & Smith, 2015; Marks et al. 2007). Studies suggest links to physical illness (Anda, Felitti, Bremner, Walker, Whitfield, Perry, Dube, Giles, 2006; Rostila & Sareela 2011) and a vulnerability to long term health problems (Luecken & Roubinov, 2012; Neeleman, Sytema & Wadsworth, 2002): increased levels of self-blame, low self-confidence, low self-esteem and

social introversion (Mack, 2004; Høeg, Johansen, Christensen, Frederiksen, Dalton, Dyregrov, Bidstrup, 2018). In addition, maladaptive coping strategies including emotional eating and alcoholism have been linked with early parental loss (Høeg et al. 2018; Finkelstein, 1988) and rates of suicide in adulthood may increase as a result (Hollingshaus & Smith, 2015). These effects extend further and translate into social and economic difficulties. Edelman (2014) reports that sleep disturbances, academic difficulty, poor concentration and depression are common. Indeed, according to Valle and Tillman (2014), adults raised in 'intact homes' are more likely to have greater academic achievement, do better financially and generally enjoy a higher quality of life. In contrast, Mack (2004) and Parsons (2011) suggest those who experienced early parental death underachieve at school, have lower employment rates and are prone to criminal behaviour. In fact, it is estimated that 10-21% of those bereaved eventually develop some significant internalizing and/or externalizing disorder (Gersten, Beals, & Kallgren, 1991; Worden, 1996), and that stressful events after the death can compound these effects (Haine, Ayers, Sandler, Wolchik, & Weyer, 2003).

In contrast, other researchers such as Maier and Lachman (2000) indicate no ill effect of parental death, with literature suggesting more negative effects in midlife from early experiences of parental divorce than death. According to Lueken (2008), psychological distress associated with the early death of a parent usually resolves over time, with most individuals surviving parental loss without experiencing lasting mental health problems (Stikkelbroek, Prinzie, de Graaf, Have, Cuijpers, 2012). However, can early loss have 'no effect'? Death and grief, particularly during adolescence, may influence development and 'who' we become. Individuals are shaped by their experiences, and, like any traumatic life event, loss changes people, albeit, sometimes for the better. It may be that, "childhood bereavement plays a causal role in only a small minority of cases of mental illness" (Bowlby, 1980, p. 300, in Harris, 1995), and there may be positive aspects to experiencing the trauma and pain of parental death. Strength and growth may emerge as a result of such adversity and positive outcomes such as increased self-worth have been reported (Heinzer, 1993). For

others however, the anguish and sadness felt as children never goes away, resurfacing in later life.

2.2 Grief and bereavement

To understand the possible long term effects of 'mother loss', it is helpful to consider grief and bereavement and be aware of some of the various 'approaches' to the process of grief. Loss is "normal... unavoidable and inexorable" (Viorst, 1986, in Harris & Gorman, 2011. p. 3), a fundamental human experience. However, with loss comes grief, the "human reaction to loss" (Larson, 2013, p. 313,). Often complex and painful, Thompson (2012) reports that grief involves cognitive, physical, social and spiritual features; involving all dimensions of the person (Corr, 2000). Bereavement may be influenced by culture and represents a process of 'coming to terms' with loss (Humphrey & Zimpher, 2008). It involves realization, adaptation, adjustment and transition towards "(making) real inside the self an event that has already occurred outside" (Parkes, 1952, p. 53, in Harvey, 2002).

Grief has been described by Worden, (1996) as an active 'journey', which includes facing the emotional pain and sadness associated with loss (Bylund-Grenklo, Furst, Nyberg, Steineck & Kreicbergs, 2016). If avoided, it has been suggested that the bereaved may later experience problems including resurfacing of post-traumatic stress symptoms, such as anger and hypervigilance (Mannarino & Cohen, 2011). Various grief models have identified 'tasks' and 'stages'; theories to make sense of grief and the course of bereavement. Some concepts suggest that the grief process follows a time frame or linear processes, offering concepts of 'moving on' or an end point of 'accomplishment' (Jordan, 2017; Humphrey & Zimpher, 2008). The alternative, complicated grief, according to Silverman (2000) has negative connotations and is associated with illness and emotional issues but is rarely acknowledged says Samuel (2017), due to the general taboo around the subject of grief. However, reality paints a different picture. As stated by Silverman (2000), grief does not end at a given time and cannot be 'mastered'; hence, 'closure' may be illusive and potentially isolating for the bereaved. Grief is

not a 'one off' event but a lifelong process with no "ideal responses", writes Luxmoore (2012, p. 27); it is not necessarily intense and has no timeline (Kopsa, 2019; Bylund-Grenklo et al., 2016). The same loss may present itself time and again over the lifespan with many adjustments necessary over the years (Harris & Gorman, 2011). Historically, 'getting over' a loss or 'letting go' was seen to be the objective of grieving. However, perhaps one never 'recovers' from loss, rather, must adopt a new way of being; adjusting to life with the pain of loss (Harvey, 2002). The dual process model describes grieving as a long-term process of oscillation between facing and avoiding grief rather than proceeding through several stages (Stroebe & Schut, 1999). Pearce (2011) suggests bereavement is a never-ending process, whereby eventually grief becomes part of life. Neimeyer (2019) argues that adaptation to this new reality may involve finding or constructing new meanings in life, keeping the individual 'alive'; continuing a bond' with the deceased, as described by Silverman and Klass (1996). Moving away from conformity of a 'prescribed' grief process may be a relief, not from personal sadness but from societal expectations of how one is *supposed* to feel (Kopsa, 2019).

2.3. Mediating factors

Bereavement may bring common reactions and emotions; it is however, an individual experience which is *greatly* influenced by context. Whilst some factors may be protective, Walsh (2012) and Thompson (2012) maintain that other common "stressors" (p. 73), or "vulnerability factors" (p. 134), exacerbate the journey of grief, impacting development, increasing the possibility of complicated grief, failed mourning and subsequent effect on a woman's adult life.

These "mediators of mourning", described by Worden (2009, p. 57) and Parkes (2012), such as financial and family circumstance (Desai & Bevan, 2002), nature of death and social support, influence bereavement (Ellis, Dowrick & Lloyd-Williams, 2013), potentially compounding socioeconomic hardship, contributing to vulnerability in grief (Sandler, 2001).

2.3.1 Relationship

While associated with introversion in males, early mother loss brings a higher likelihood of depression in females (Maier & Lachman, 2000); viewed as transformative, exerting a lasting influence on the development of identity and personality (Edelman, 2014). Although boys may experience more immediate psychological difficulties following mother death (Dowdney, 2011), Leopold and Lechner (2015) suggest that women struggle to adapt for many years following the loss of their mothers, and have trouble expressing feelings, experiencing the deepest drops in life satisfaction.

For innumerable women, mothers are figures of “primary attachment” (Howe, 2011, p. 12), representing affection and security (Bowlby, 1969, 1980); a bond so primal that “severage” signifies loss of childhood (Harris, 1995) and the child’s ‘emotional death’ (Rye, 2004; Lowthert, 2016). For many women, the mother represents unconditional love and acceptance; her death bringing “a void that can never be filled” (Lowthert, 2016, p.14).

Teenage girls whose mothers die are a particularly vulnerable group as a woman's development is generally bound to her relationship with her mother (Worden, 2010). Children tend to identify with the same gender parent and a woman's sense of self evolves from her attachment and identification with her mother (Pill & Zabin, 1997). The mother-daughter bond is characterized by a closeness of all family connections (Chodorow, 1978; Fingerman, 2001; Rossi & Rossi, 1990). So, Edelman (2014) explains, mother death involves the permanent loss of a guiding developmental figure and critical attachment relationship. Mother loss may bring a void of emotional care if the person lost is the one to whom one would have turned in difficult times. Mother death for daughters brings many other losses: loss of support, nurture, acceptance; an ally, friend and adviser, which may complicate normal transitions and decisions in life, leaving her with a sense of incompleteness (Worden, 1996; Harvey, 2002). However, does society or biology account for this assumption? Are women predisposed to be more nurturing than men? (Rossi, 1984). Studies suggest that fathers are equally as capable

of assuming the role of primary carer, and most children do, of course, become attached to their fathers (Marks et al. 2007). Perhaps however, stronger bonds with fathers are forged when mothers are absent, or relationships are poor? Studies suggest that mother loss is worse than father loss; fathers may find single parenthood more challenging, having difficulty providing stability due to coping strategies or insensitivity to children's needs (Dowdney, 2000, in Abrams, 2013; Worden, 2010). This research is potentially sexist and dated; modern men participate in emotional caregiving and competently assume single parent roles, however, generally mothering still tends to mean something different to fathering (Abrams, 2013).

The death of a mother has been described as life altering for a woman (Schultz, 2007), leaving girls vulnerable, "particularly when parent and child are close", as emotional attachment mediates the impact of death (Harvey, 2002, p. 51). Close bonds bring a potential for pain of loss (Bowlby, 1969). So, it may be said that grief is "determined by ... intensity of love" (Worden, 2009, p. 58); the consequences of losing a close mother-daughter relationship may resound indefinitely. So, what of the women who did not share a close emotional bond with their mothers? For those who felt freedom following their mother's death. According to Edelman (2014) they *also* mourn that loss and the bond shared by negative events and feelings, mourning twice fold: grieving what was lost with their mother's death and grieving for what they had never had.

2.3.2. Life stage

To experience loss at any age can bring pain and confusion. However, adolescence is especially complicated. Harvey (2002) maintains mother death at this life stage represents an unfair, damaging life change, complicating normal adolescence and pubescent development (Balk, 2000; Schultz, 2007), resulting in feelings of powerlessness (Ribbens McCarthy, 2007). Subsequently, unresolved grief, psychological and social difficulties may result in later life (Keenan, 2014). This finding demonstrates the difficulty of addressing such unique challenges

during this transitional age (Smith, Hanson, Norton, Hollingshaus, Mineau, 2014; Parsons, 2011; Howe, 2011).

Adolescence is characterised by rapid growth, mood swings and the substantial physical, hormonal, social and psychological changes of puberty (Bylund-Grenklo et al., 2016; Erikson, 1963, in Sugarman, 2001). Commonly a time of conflict, adolescents strive for independence whilst being still emotionally dependent, often resulting in dissention with others (Abrams, 2013). According to Erikson (1980) the search for and formation of personal identity is central to adolescence. This is challenging for the bereaved adolescent as these 'development tasks' cannot be delayed during bereavement, potentially leading to identity uncertainty (Schultz, 2007; Keenan, 2014). However, tasks of self-definition could be viewed as something created by society or imposed by theorists. Perhaps formation of identity is not limited to adolescence but begins then, continuing to evolve throughout each life stage.

Loss of the mother-daughter bond means the loss of the pivotal relationship from which adolescent girls explore identity and self-definition (Josselson, 1987; Erikson, 1980; Schultz, 2007). Motherless women may lack knowledge of how to 'be' a woman due to loss of "primary model for womanhood", making them uncertain (Edelman, 2014, p. 189). However, identity formation in adolescence may be influenced by others (Kroger, 1989); motherless females may yearn a guiding mother figure but measure their adequacy by comparing themselves with other females. Without a role model, they may feel deficient. Perhaps one parent can assume the role of another? However, women tend to define themselves in relation to attachment figures, *particularly* the mother, but perhaps through socialization and implicit encouragement (Gilligan, 1982; Josselson, 1987; Schultz 2007). In today's emancipated times however, this research may be passé, culturally biased and vague. Family units often consist of single or same sex parents.

Development must continue alongside grief (Erikson, 1980); accepting the reality and meaning of loss is important while experiencing grief at every developmental stage (Worden, 1996;

James, 2003). Keenan (2014) writes that when a traumatic event happens in adolescence, elements of daughter's personality become halted; she may reach adulthood retaining characteristics of the developmental phase she was in, emotionally, still a teenage girl.

The loss of a mother is permanent and unchanging, but grief is not, rather, it is part of the teens ongoing experience (Biank & Werner-Lin, 2011). However, as Abrams (2013) says, teenage lives are hectic; often too busy to grieve, they may carry their grief into adulthood, potentially affecting 'growth' (James, 2003).

Friendships are vital in adolescence, through which approval, acceptance and self-esteem are determined (Shaffer & Kipp, 2014); desire to conform and belong to close peer groups may lead teens to repress grief to 'fit' with peers (Boyd & Bee, 2015). This, claims Miller (2019), can lead to withdrawal and isolation, compounded by feelings of envy and deprivation when comparing themselves to others (Humphrey & Zimpher, 2008). Embarrassment and a desire to hide emotion may stem from cultural socialization but adolescents may also be afraid of their profound emotion (Edelman, 2014). However, as in the 'dual process' model of grief, adolescents experience "short bursts of grief", whilst a connection to the deceased is maintained to cope with their new normal (Stroebe & Schut, 2010; Silverman & Worden, 1992, in Corr, 2000). Consequently, teen grief can be overlooked and disenfranchised; others believing them to be resilient in their silence and outward stoicism (Harris, 1995; Schultz, 2007). James (2003) reports, adults may believe they are being protective, but silence and misunderstanding leads to isolation and loneliness. For some the wounds of adolescence persist into adulthood (Harris, 1995).

Pressure on teens to be sociable and take charge of life makes grief difficult, with time and emotional strength scarce. Keenan (2014) describes a "double dose effect"; teens must deal with adolescent changes which are then compounded by similar features of bereavement, making life more confusing (Abrams, 2013). Teens are praised for happiness and bravery; consequently, open grief often brings feelings of shame (Sugarman, 2001). Death is a cultural

taboo and silence often surrounds mother death (Luxmoore, 2012). For adolescents, with little support and muted in their grief, a clear message of silence is given (Rye, 2004; Luxmoore, 2012). According to Fry (2000), adolescents can ignore and suppress grief, leaving them suspended in grief and development. James (2003) explains, if emotions are hidden, impact of loss goes unacknowledged resulting in isolation and distress. Delayed grief is common, silenced by their environment and culture, friends, family and themselves, sometimes the only strategy for survival is not dealing with it, so it is delayed. However, delay often results in denial and a failure to mourn (Abrams, 2013; Keenan, 2014), which contributes to long term explicit or implicit grief, and suffering in response to losses in later life (Volkan & Zintl, 1993, in Harvey, 2002).

2.3.3. Support

Society itself influences perception of loss, dictating cultural rules by which to grieve (Gross & Ballif, 1991, in Shaffer & Kipp, 2014, p. 375). Grief and bereavement can be restricted and subdued by pressure to conform to societal expectations of 'reasonable' reactions, increasing anxiety and impact of loss.

'Cultural silence' also exists within the family of the deceased; unspoken communication rules created in a desire to 'shield' or avoid painful memories (Ellis et al., 2013). However, says Tracey (2011), attempts to protect children from distress are not helpful, and studies suggest that open and honest communication is far more helpful than silence or evasion (Wass, 1995, in Tracey, 2011). Thompson (2012) explains, a lack of father's 'open grief' can set the tone within a family, resulting in suppression of feelings. The ability of a parent to communicate their own grief can help children talk about their loss. However, it is common for teenagers to be rushed back to school, in an attempt for life to resume normality. Thus, women bereaved of their mothers in adolescence grow up with the most significant experience of their lives suppressed and enveloped by silence. Not surprisingly, the legacy of early grief resurfaces at varying times throughout their lives.

Anderson, Goodman and Schlossberg (2012) report the cruciality of support received around the time of death. It affects coping in adulthood, and lack of responsive care is associated with feelings of helplessness and clinical depression in adulthood (Harris et al., 1986, in Tracey, 2011). Although most children are resilient, 'adaptation' is generally dependent on the remaining parent (Dowdney, 2011; Koblenz, 2015). Consequently, the quality of relationship and parent's coping style is vital (Keenan, 2014). Adolescents often feel overwhelmed if the remaining parent is emotionally unavailable (Connidis, 1992, in Apelian & Nesteruk, 2017). 'Double jeopardy', or the loss of the mother *and* the symbolic or temporary loss of the father (or other parent), compounds distress (Riches & Dawson, 2000). According to Edelman (2014), lack of support from the surviving parent or the non-disclosure of information has been associated with latent anger and feelings of abandonment and despair; without compassionate, reliable support, bereaved children may have increased feelings of low self-worth and be more vulnerable to stress. Silverman and Worden (1993) report motherless children are less likely (than fatherless children) to have their emotional needs met. However, other studies indicate that with stability and warmth better outcomes in adulthood are predicted for bereaved teenagers (Haine, Wolchik, Sandler, Millsap & Ayers, 2006; Thompson, 2012). Furthermore, adolescents with healthy grieving processes have "access to an adult with ... enough emotional strength to support them" (Humphrey & Zimpher, 2008, p. 110). In this case, negative effects of bereavement in later life may be reduced or eliminated (Hurd, 1999, in Tracey, 2011; Ellis et al., 2013). Nevertheless, this cannot 'undo' the event, and the fact that most daughters will spend their life missing their mothers.

2.4. Secondary losses

The death of a mother, although a single event, extends far beyond. Accompanied by additional stressors, it is often followed by a ripple of secondary losses which may complicate grief, impacting the adolescent's sense of safety and acceptance of grief (LaFreniers & Cain, 2015; Worden, 1996) .

Walsh (2012) explains, bereaved adolescents often experience a form of 'parentification'; catapulted into adulthood, assuming responsibilities, including the role of the dead mother. Commonly, the bereaved daughter takes responsibility to support the remaining, grieving parent, withholding grief in order to shield them (Sveen, Kreicbergs, Melcher, & Alvariza, 2016). Pockets of 'hypermaturity' can exist alongside aspects of immaturity (Keenan, 2014), potentially leading to difficulty separating from the surviving parent (Miller, 2019). Studies indicate that bereaved daughters may also experience the metaphorical 'loss' of their fathers, loss of family home, financial stability, friends, family routines and education (Keenan, 2014; Mannarino & Cohen, 2011). Such difficulties make adjustment more difficult, and the longer the disruption, the greater the impact on the adolescent, potentially leading to emotional difficulties later in life (Worden, 1996; Ellis et al., 2013).

Death of a mother may bring ambiguous loss; often invisible to others, remaining unacknowledged (Howe, 2011; Attig, 2011). Disenfranchised losses may sometimes not be recognized by the bereaved themselves and remain unvalidated, compounding grief and impacting subsequent development (Boss & Couden, 2002, in Harris & Gorman, 2011; Humphrey & Zimpher, 2008).

A mother's demise may represent loss of security and the 'future'. With age, the sense of who has died changes (Silverman, 2000). Edelman (2014) suggests that bereaved daughters experience a loss of knowing their mother as a 'person', rather than as their mothers, losing, also, a connection to past generations of women. This may lead to a desire for information

and imaginings of what their relationship may have been; loss is experienced at many moments throughout life. Crucially, when a mother dies, females experience a sense of discontinuity, where their identity is changed (Harris, 1995). They are different as a consequence of loss, having lost part of them 'selves' (Harvey, 2002).

Lasting effects of loss later in life may be dependent upon opportunity to grieve; and opportunity, dependent on mediating factors. Perhaps avoidance of grief is integral to the experience of mother death in adolescence. Certainly, "when a (mother dies), it changes everything forever and the ripples just go on" (James, 2003, p. 45).

2.5. Enduring effect

Fairly little is known specifically about the longer-term consequences of mother death in adolescence for adult women, but studies indicate that the 'event' is particularly disruptive and stressful and that effects continue to influence health long term (Hollingshaus & Smith 2015).

Some research suggests that the detrimental effects of adjustment to loss fade over time (Feigleman, Rosen, Joiner, Silva & Mueller, 2017). However, Mannarino and Cohen (2011) found that loss experienced as traumatic, and the absence of 'normal bereavement' (due to the unique challenges faced in adolescence), may lead to mental health problems later in life. This is supported by other studies, indicating that this experience has more than a short term effect (Bylund-Grenklo et al., 2016; Moore & deGraaf, 2016).

On some level, the "ripple effect", of a mother's death is unending, pervasive and non-finite (Rando, 1993, in Harvey, 2002, p. 9). The woman may always feel a sense of loss; an unrecognized continuous sadness and adjustment which is overlooked and ignored by society (Harris & Gorman, 2011).

The close relationship between mother and daughter may intensify with age, with mothers generally providing support and advice to daughters into middle age (Eggebeen & Hogan, 1990 in Marks et al. 2007; Fingerman, 2001). As such, women's lives unfold with a sense of

‘missing’ the person and the relationship that has been lost. James (2003, p. 44) expounds, “increasing maturity and knowledge brings further anguish”. At each life stage, the meaning of death must be reexplored. Important events and significant dates may be painful, bringing happiness but also sadness and re-surfacing of grief and abandonment (Rando, 1993). Edelman (2014) and Fry (2000) agree, the significance of death is continually changing, making transitions difficult, feelings of isolation and confusion common (Pill & Zabin, 1997). However, rather than being considered ‘unresolved grief’; this may be part of a natural and ever-changing process (Silverman, 2000).

In the wake of huge loss, Mack (2004) maintains, the bereaved are emotionally sensitized, making future losses more painful (Schwartz, Howell & Jamison, 2018; Luecken & Roubinov, 2012); losses are “layered” and the impact of subsequent loss is magnified (Harris & Gorman, 2011).

2.5.1. Life perspective

The abyss of grief following mother death often leaves the daughter feeling lost and alone, guideless and unsafe (Silverman, 2000); a “terrifying insecurity marks life after the catastrophe of early death” (Harris, 1995, p. 6; Sandler, 2001). Edelman (2014) and Dehlin and Martensson (2009) suggest this experience alters life perspective, disrupting perception of control. Chaotic environments may make bereaved adolescents hyperalert to any perception of danger, even if benign (Luecken, Appelhans, Kraft, Brown, 2006). This can lead to greater distress, poor self-regulation (Evans, Gonnella, Marcynszyn, Gentile & Salpekar, 2005) and fear that happiness is precarious as it was in childhood (Abrams, 2013). This wider sense of “ontological insecurity”, leaves the individual vulnerable, lacking confidence and unable to cope with other losses, leading women to feel “unsafe to ever be too happy” (Thompson, 2012, p. 80). Everyday activities may be affected, with goodbyes, generating “painful feelings of loss” (Abrams, 2013, p. xv).

Similarly, with the realization of human 'limitations', the fear of personal mortality in adulthood is frequent (Christ, 2010). Death has become a reality, and as such, never feels far away (Harris, 1995). Anticipating death for oneself, or close others is common, potentially effecting enjoyment of life (Harris, 1995). Denes-Raj and Ehrlichman (1991) and Zall (1994) report that women bereaved of a mother in adolescence predict shorter life spans for themselves and worry more about their own death, feeling fearful and depressed (Edelman, 2014). Fear translates into health anxiety; terror surrounding death and leaving children motherless. Thinking about 'death date' in relation to their mother's is common (Harris, 1995; Edelman, 2014); fearing the milestone age of their mother's death, some avoid future planning, anxious that life will repeat itself, and become uncertain when this age is surpassed (Harris, 1995). Consequently, risk taking may become unlikely (Worden, 2009). In contrast, Denes-Raj and Ehrlichman (1991) suggest that some women may harbour a sense of fatalism and embrace harmful habits.

Nature of death is important as fear may centre around the cause of death; anxiety regarding hereditary diseases may dominate life, bringing feelings of hopelessness and doom. Some women may become vigilant and conscientiously attend health screenings.

In contrast, however, those who have experienced close loss, may be better able to contemplate death than others shielded from it (Luxmoore, 2012, p. 27). To have faced the reality of death, to have "its name on your tongue" is somehow liberating (Barnes, 2008, p. 41, in Luxmoore, 2012, p 24). Harris (1995) suggests this brings fearlessness and a strengthened passion for life, some compelled to change their life perspective and "enjoy the moment" (Apelian & Nesteruk, 2017). Furthermore, although life events such as marriage and birth may reactivate grief (Rando, 1993), in some way may be interpreted positively; a sense of reassurance that one's fate is different to one's mother and age of death (Keenan, 2014).

So, a changed philosophy or perspective on life often results after mother death in adolescence.

2.5.2. Identity

A mother's influence on her daughter's development and sense of self is crucial (Gilligan, 1982). Loss causes a 'rupture' in development (Schultz, 2007; Abrams, 2013, p. 132), altering 'self' and causing difficulty in the formation of personhood. With "little nurturance/assistance from the outside world" (Harris, 1995, p. 110), uncertainty and insecurity and a need to recreate oneself may result (Harris, 1995). According to Edelman (2014) loss of a 'secure base' leads to a loss of self-confidence and self-esteem. Siegal and Hartzell (2014) explain; unmet relational needs in childhood may show as mistrust, fear of abandonment and poor self-esteem, leading to the development of an exclusionary self-protective coping mechanism as 'survivor mode' takes over (Archer, 2019); a persona of competent autonomy, independence, resilience and control, insulated against future stresses. However, believing only in self-reliance, they may become fearful of future loss, leading to insecurity and being perceived by others as intimidating and unapproachable. Edelman (2014, p. 14) suggests this "veneer of strength" may prevent the woman from allowing herself to feel emotion and be vulnerable; she may appear tough but feel like a child needing protection, needing to be hugged (Clark-Coates, 2019).

2.5.3 Relationships

Studies suggest that distress experienced by early mother death, compounded by mediating factors and secondary loss, may present significant impact in adulthood in terms of social competence, sustaining intimacy, loss of self-esteem and self-worth (Sroufe, 2005; Riches & Dawson, 2000). This may have a lasting impact on attachment style (Waters, Merrick, Treboux, Crowell, & Albersheim, 2000) and a woman's ability to form and maintain healthy relationships, effecting general wellbeing (Brenner, 2018; Hoeg et al., 2018).

Mother death in adolescence has been linked with unstable relationships (Johnson & Barer, 2002, in Lueken & Roubinov, 2012), multiple relationships and higher rates of separation (Hoeg et al. 2018). For the bereaved daughter, Harris (1995) explains, love and loss are no

longer separate. The potential of loss and abandonment feels ever present, so engage in brief relationships or avoid meaningful relationships to limit pain, with studies indicating a hesitancy to marry (Feigleman, et al. 2017; Høeg et al. 2018). Some, love repeatedly, searching for the love lost in adolescence, or believe that nothing lasts forever (Harris, 1995). Some end relationships prematurely, perhaps as a form of self-protection (Brenner, 2018; Luxmoore, 2012). However, some have meaningful relationships, often drawn to other 'survivors', bound by a common bond; some settle, compromising for security, rather than love (Harris, 1995). Self-reliant and independent, with self-constructed barriers, may mean guarding their hearts without realizing (Lowthert, 2016). Furthermore, anger, over-competence and a confrontational demeanour may often result in distance from meaningful relationships (Harris, 1995).

However, many women maintain healthy adult relationships, albeit, some less stable due to attachment insecurity. This may indicate a strength of character and resilience in the face of loss (Brenner, 2018). Endelman (2014) states that when emotionally stable partners are chosen, feelings of security develop.

2.5.4. Approach to parenting

The effects of mother loss and unresolved mourning are pervasive, Keenan (2014) elucidates, and may potentially extend to future generations with parenting potentially complicated by the experience of early loss (Rowe & Harman, 2014).

Zall's (1994) study showed distinct parenting traits such as over-protective and anxious mothers, fearful of leaving their children motherless, determined to be 'good mothers' but with higher levels of stress, sadness and depression. Edelman (2006) maintains that 'motherless mothers' may feel the impulse to prepare their children for the possibility of their death and fear reaching the age their mothers were when they died. Anxiety may increase with their children's maturation, as their memories and developmental struggles are reactivated within

them. However, according to Mireault, Thomas and Bearor (2002), the children of motherless mothers are generally well-balanced and undisturbed.

Profound impact of loss and grief in adolescence may result in a form of “arrested development”, the woman frozen emotionally. This may impact ability and confidence in motherhood, with a subsequent affect upon the children of the bereaved (Zall, 1994; Keenan, 2014).

A motherless mother has lost maternal support and guidance and the primary model for parenting (Harris, 1995). Edelman (2006) explains, with no direction or advice, mothers may feel uncertain, inadequate and insecure. Parenting may feel uncharted, as memory only serves to a certain point, so instinct and common sense must be relied upon (Harris, 1995). This may extend to ‘grandmotherhood’, with no example to follow, uncertain in their role.

While some women remain childless by choice, fearful of repeating the loss they suffered, some, Harris (1995) points out, attempt to heal their pain of loss by providing for their children what was missing for them. Edelman (2006) furthers, mothers may overcompensate or over-protect in attempt to ‘self-repair’, striving to instil survival skills in their children, to equip them for potential pains of life. In this regard, a ‘generational effect’ ensues, with grandchildren developing the same characteristics of strength and independence as motherless daughters.

In some ways, becoming a mother may complete the cycle of human growth that is “healing and joyful” (Harris, 1995, p. 171). Edelman (2014) writes that motherhood may restore some self-esteem, making whole what was broken. Zall (1994) agrees that having children helps to repair emotional pain. Furthermore, Rando (1993) maintains that when having a child, motherless mothers may view their loss from a ‘different angle’, bringing a sense of connectedness with their mothers, as a mother.

Perhaps, suggests Luxmoore (2012), becoming a mother does represent personal repair, neutralizing and balancing the loss of a mother, resulting in the woman feeling less alone. For

some, motherhood may serve as an opportunity to experience unconditional love, not experienced since their mothers. Perhaps having a daughter, somehow brings back the lost mother-daughter connection?

2.5.4. Positive aspects

Given the myriad of studies highlighting the potential for negative impact in later life, it may be assumed that loss of a mother during adolescence brings only pain. Certainly, loss may be negative, but may also lead to psychological growth and potential gain (Lendrum & Syme, 2004; Larson, 2013).

Research identifies positive legacies arising from this experience (Ellis & Lloyd-Williams, 2008; Rye, 2004). “Losses are necessary because we grow by losing, leaving and letting go” (Viorst, 1986, p. 3 in Harvey, 2002, p. 8) and thereafter, many people mature and evolve, developing richer meanings and new perspectives (Hope & Hodge, 2006; LaFreniere & Cain, 2015). Loss can bring to question fundamental beliefs but examining existential issues can result in greater meaning and new depth of potential (Calhoun & Tedeschi, 2000). According to Machin (2014), Brenner (2018) and Lowthert (2016), despite the unwanted legacy of loss, some women are not ‘damaged’ and develop into healthy individuals triumphing over loss, growing and evolving through adversity, experiencing a “phoenix phenomenon” (Wainrib, 2006; Gorman, 2011, p. 225).

For some women, comfort and strength is found in the continuing bond with their mother, while some feel a sense of ‘survivor pride’ (Harris, 1995). Some studies suggest that early mother death and adversity may bring the remaining family together, enhancing ‘sibling loyalties’ (Mack, 2004). However, as primary “kin-keeper” within the family, often siblings become distant without the parent who provided their connection (Johnson, 2000, in Mack, 2004).

Harris (1995) suggested that some may experience a sense of freedom following mother death, and determination to ‘seize the day’; the past having taught an increased sense of

responsibility, independence and self-reliance (Harris, 1995). Similarly, Edelman (2014) reports, loss precipitates growth. The bereaved may feel liberated following self-reflection, more able to realize and develop their 'real' selves.

Death of a mother may lead to an appreciation for life and loved ones (Greene & McGovern, 2017). Experience of loss, and the knowledge of mortality, adds meaning, making life feel more precious having experienced pain, "strengthen(ing) the pleasure of being alive" (Bauman, 2001, in Thompson, 2012, p. 176). Improved competency, communication and coping skills have been reported, although, perhaps born of necessity (Martinson et al. 1994, in Ellis Lloyd-Williams 2008; Heinzer, 1993). Common themes regarding increasing strength, gratitude, maturity and resilience abound following mother death in adolescence; "suffering makes you learn a lot about life... it makes you grow" (Apelian, Nesteruk, 2017, p. 92; Dehlin & Martensson, 2009).

Personal growth, however, may not be an *automatic* consequence of experiencing loss; studies indicate that growth *can* emerge from adolescent bereavement (Gorman, 2011), through the hard work needed to gain insight from it and give it meaning (Harvey, 2002).

Loss is a subjective experience; people react in individual ways, but it is a universal phenomenon with 'typical' responses (Larson, 2013; Harvey, 2002). Indeed, loss of a mother for a teenage girl is particular; so personal in its meaning but carrying commonalities that override many variables (Edelman, 2014). Undoubtedly, change is a result of loss, often with negative enduring effect; there is nothing good about losing a loved one, however, "some grow strong at the broken places", resulting in positive growth (Hemingway, 1929, in Gorman, p. 225, 2011).

This study will build on existing literature by addressing the gaps in qualitative research around understanding both the shared response and unique effect of mother death in adolescence and subsequent impact on a woman's life and approach to parenting. This may contribute towards the validation of this incalculable loss.

Chapter 3:

Methodology

3.1. Research design

Both qualitative and quantitative methodologies were considered as a means of research enquiry for this study and, as evidenced by the literature search, historically, research around this topic has mostly consisted of quantitative work (McLeod, 2015). However, quantitative research deals with large scale samples and objective factual knowledge, whereas qualitative work is concerned with understanding human experience (Mintz, 2010) and aims to “describe, explore and analyse the ways people create meaning in their lives” (McLeod, 2015, p. 92).

Considering the research question:

‘How is mother death during adolescence perceived to have affected the adult woman, including her subsequent approach to motherhood?’

a qualitative methodology was deemed to be an appropriate approach (Willig, 2001; Hanley, Jordan & Wilk, 2015). The objective of the study was to explore the perceptions of women who share this experience; to hear their unique stories, whilst seeking to develop and enhance an understanding of the (considered) impact on their adult life and approach to parenting. The research was concerned with a specific group and did not seek to present a hypothesis; rather, a focus on lived experience, its meaning and how this shaped the lives of the participants (Timulak, 2015; Larkin, Watts & Clifton, 2006). Furthermore, qualitative methodologies reflect my interest in the individuality of experience and working and interacting with participants rather than the objectivity of quantitative study (Finlay, 2015; Sanders & Wilkins, 2010).

3.2. Interpretive Phenomenological Analysis (IPA)

It was intended that the phenomenological experiences of women would represent the heart of this research, with an emphasis on making sense of that phenomena in terms of the

subjective beliefs and meanings brought by each woman (Denzin & Lincoln, 1998, in Finlay, 2015). Subsequently, it was decided that the methodology should reflect that participants were themselves, the experts of their own experience and associated meanings. Therefore, it was important for their voices to be heard. Consequently, it was decided that the study would follow the IPA approach (Smith, et al. 2013).

IPA is concerned with quality of experience (Smith et al. 2009). Spinelli (2005) suggests that to understand the perception of the participant, researchers must become absorbed in their world, in a process similar to that of counsellor and client (Willig, 2013). However, to avoid bias, the researcher must also stand back (Elliot & Williams, 2001), laying aside expectations and assumptions (Denscombe, 2010; McLeod, 2011).

Unlike thematic analysis, IPA's interpretive analysis involves engaging with and interpreting data using a double hermeneutic (Smith et al. 2009). From a phenomenological standpoint, perception of an experience is subjective (Dallos & Vetere, 2005), as is the interpretation of data, so must be recognized as part of the process (Flick, 2015). Therefore, as the 'instrument' of research, reflexivity was crucial regarding my subjectivity and influence from interviews to analysis (McLeod, 2015; Barbour, 2013).

3.3 Sampling and recruitment

Consistent with IPA and the qualitative paradigm, purposive sampling was employed to recruit a sample of four participants that would "represent a perspective, rather than a population" (Smith et al., 2009, p. 49). This "hand-picked" small sample (Denscombe, 2010, p. 35) allowed focus and time for development of participants' stories; enabling insight into their experience (Finlay, 2015; Smith et al. 2009).

3.4 Criteria and Rationale

The following table details the criteria required of the participants and the associated rationale.

3.4.1. Table of inclusion and exclusion criteria

Inclusion criteria	Rationale
<ul style="list-style-type: none"> adult women, over age 40. 	<p>Although seemingly an arbitrary age, the intention is to look at lifelong effect of loss; incorporate impact of milestone events and potential triggering of grief response, layered loss and non-finite loss (Harris & Gorman, 2011). Choosing participants over 40 allows for sufficient retrospectivity and chance for subjects to have become mothers themselves.</p>
<ul style="list-style-type: none"> have experienced the death of their mother during their adolescence, (13-18 years of age). 	<p>According to Arnett (2007), adolescence is a period of transition between childhood and adulthood, usually associated with the teenage years, but may begin earlier or end later. For the purpose of this study, adolescence has been limited to teen years between (and inclusive of) age 13 to 18. Age provides only a rough marker for adolescence and is difficult to define in concrete terms. It may be viewed as a life stage rather than an age.</p>
<ul style="list-style-type: none"> deem themselves to be sufficiently grounded in their experience of loss to discuss related issues in depth. 	<p>Interview questions may trigger memories, and the nature of the subject may be distressing.</p>
<ul style="list-style-type: none"> not currently undergoing bereavement counselling 	<p>Due to the potentially distressing nature of the topic, 'issues' may be complicated or exacerbated, particularly if undergoing bereavement counselling</p>
<ul style="list-style-type: none"> mothers 	<p>Participants should be a parent in order to reflect on their experience of motherhood</p>
<ul style="list-style-type: none"> able to speak and read English. 	<p>To participate in interviews and understand transcription</p>

Exclusion criteria	Rationale
<ul style="list-style-type: none"> potential participants who may be personally known to me. <p>These participants were written to personally with explanation and thanks.</p>	<p>To avoid dual complication of relationship</p>

The recruitment process began following ethical approval from the University of Chester, aiming to find a homogenous sample of participants. As Smith et al. (2009) recommend, criteria were set to ensure uniformity in the group, enabling variability to be examined. Recruitment by ‘snowballing’ was considered but deemed unreliable and simply, no appropriate participants were known of. Finding ideal participants was made easier by social media and the existence of relevant Facebook groups.

Having requested permission from ‘group admin’, I posted an advert seeking volunteers (appendix 1). To maintain anonymity, potential participants were asked to use my Chester University email.

Many responses were received, but not all respondents fitted the criteria. However, interest in talking about loss was clear; many people wanted to share their stories. Several appropriate prospective participants made contact by email and further information about the research study was provided and if appropriate, interviews were arranged (appendix 2 & 3). Those who made contact and did not meet the criteria were written to and thanked for their interest.

3.5 Data collection

Data collection method followed from choice of methodology and, with a desire to explore and understand the participant’s experience, individual, face-to-face interviews were deemed to be most appropriate (Finlay, 2015).

All interviews were recorded at times and in geographical locations convenient to the participants; each meeting lasting between 2 - 3 hours. This entailed introduction; the interview and debrief time (if desired). As McLeod, (2015) suggests, this form of data collection requires sensitivity and a commitment to look after responders, attend to stress levels and 'closure' at the end. Due to the possible "strong emotional response" (Bond, 2015), participants' safety was paramount. Interviews were carried out with care and appropriate support offered (Smith et al., 2009).

Before each interview began, participants were put at ease; reassured that they could stop, take breaks and share only what they felt comfortable with. Finally, "non-coercive consent" was obtained for their participation and for recording to be made (Finlay, 2015, p. 172), (appendix 4).

The interview was loosely structured around exploratory, open-ended questioning to facilitate discussion of the topic (Smith, et al. 2009). In order to assist with preparation for the interview, and to lessen anxiety, participants were provided with the focus of the questions in advance (Smith, et al. 2009).

Primarily the questions centred around recounting experience, before moving to more analytical questions and ending with something more positive (Smith, et al., 2009), (appendix 5).

As a counsellor, I had an advantage of having been trained to actively listen and engage with empathy (Merry, 2002). This facilitated the investigation. However, as McLeod (2015) states, the transition from therapy dialogue to research interviewing did at times prove to be difficult, with a tendency to be non-directive or respond therapeutically.

Most participants became emotional during the interview; the depth of feeling for their loss still apparent. At times, their honesty and profoundness were humbling, and I was moved by the poignancy of their stories (Harris, 1995). As I listened 'openly' to each participant (Finlay,

2015), mindful that “the participant is the experiential expert on the topic” and as such, importance was determined by them, rather than I (Smith, et al., 2009, p. 58; Maykut & Moorehouse, 1994). On reflection, although conscious of non-bias, I felt an affinity with participants (Chenail, 2011). My subjective involvement as the interviewer and empathy due to my own experience potentially influenced the participants but brought a deeper connection and willingness to engage (McLeod, 2015). However, disclosure was minimised until after the interview to avoid any comparative element (Smith, et al., 2009).

3.6 Data analysis

In accordance with IPA, a semantic record of each interview was created in the form of a verbatim transcription (Smith, et al., 2009).

According to Finlay (2011), IPA aims to uncover the ‘lived’ experience of the participants, so, primarily, each participant transcript was approached as a separate entity. Becoming “engaged with data” (McLeod, 2015, p. 189) involved re-reading and “line by line analysis” of each transcript (Smith, 2009, p. 79; Bond, 2015). After making preliminary notes regarding language and conceptual comments using a ‘double hermeneutic’, a set of themes began to emerge (McLeod, 2011), (appendix 6). It was found that studying the transcript whilst listening to the recordings contributed to an understanding of underlying meanings (Willig, 2013; McLeod, 2015). By reflecting and cross referencing with journal notes, I was more able to ‘bracket’ myself from the data and lay aside my subjective assumption to avoid bias (Maykut & Moorehouse, 1994). However, as Smith et al. (2009) maintain, analysis may always be tentative and subjective and a combined product of participant and researcher.

Following initial ‘noting’, a computerized system was used to organize descriptive, conceptual and linguistic themes for each of the four cases, whilst, as Finlay (2015) suggests, remaining open-minded and flexible to new emergent themes for different participants (appendix 7). Thereafter, intuition was employed to capture the essence of participant’s experience to discover connections across emergent themes and create more interpretive super-ordinate

themes (Smith, et al., 2009; McLeod, 2015). I was unsatisfied with the first levels of analysis and repeated the process, with further themes emerging (Larkin, Watts & Clifton, 2006), (appendix 8).

Subsequently, patterns were then identified across cases and explored in terms of data, research question and existing theoretical perspectives (McLeod, 2011; Smith, et al., 2009), (appendix 9). These were presented, allowing data to be traced from initial process to thematic development and final structure (Smith, et al., 2009), (appendix 6-10). Finally, themes were presented alongside and evidenced by participant's representative quotations (Willig, 2013).

A great deal was learned about each participant during the data analysis. The process was challenging and complex. However, as Smith et al. (2009) suggest, with a commitment to transparency and coherence and use of supervision, sound interpretation and meaningful points of similarity and difference were developed (Smith et al., 2009).

3.7 Validity and trustworthiness

Validity refers to the 'truth' of the project and although guidelines exist relating to qualitative research, plausibility cannot be achieved by following a 'rulebook'. Unlike quantitative work, qualitative research does not deal with fact, and variables such as researcher influence must be considered and acknowledged. Dawson (2009) criticizes qualitative work due to the subjectivity of the data analysis. However, 'validity' may be inappropriate terminology in qualitative work, where meanings are explored rather than the statistical measurements of quantitative work (Flick, 2015). Moreover, it may be the trustworthiness of the study and researcher that leads to work being judged as 'valid' (Lincoln & Guba, 1985).

Thus, I have been mindful of demonstrating principles of trustworthiness (Yardley, 2000). It was important to sensitively approach data collection and subsequent analysis (Smith et al., 2009). I felt an ethical obligation to represent each participant's experience and maintained attentiveness and a commitment to rigour; effort was made to keep a "balance between

closeness and separateness”, and thoughtful, thorough analysis was performed of verbatim transcripts for transparency (Smith, et al., 2009, p. 181). Each stage of the research process, from sourcing of participants to data analysis was conducted according to IPA principles, presented clearly with an explicit audit trail, (appendix 1-10); then written up with care and consideration. Rather than offering an ‘answer’, the research aimed to enhance an understanding and contribute to existing research of the enduring effect of mother death in adolescence (McLeod, 2015). Although the usefulness and importance of the study lies thereafter, the trustworthiness of the research make plausible the findings (Smith et al., 2009).

I approached the research with integrity, commitment and honesty. Both journaling and supervision have been crucial to the credibility of the study (Flick, 2015). Being aware of personal potential influence allowed me to monitor this closely. Indeed, reflexivity ensured that both my role as researcher and the research process was repeatedly scrutinized (Willig, 2013).

3.8 Limitations

Despite the trustworthiness and credibility of qualitative research, it is important to acknowledge the variables and limitations that have influence on the study.

The following table details the key limitations of the study.

3.8.1. Table of limitations

<i>Limitation:</i>	<i>Explanation:</i>
<ul style="list-style-type: none"> • Time frame and word limit • No pilot interview due to challenge finding participants • No acknowledgement of different ethnic or social class groups • No differentiation made between mode of death • All participants were recruited from Facebook groups. • Interviewer experience • Interviewer is a counsellor 	<ul style="list-style-type: none"> • Huge topic, material had to be condensed to fit framework • May have improved interview technique • Cultural practices have bearing on bereavement and can affect experience of grief • Mode of death; sudden (accident) vs anticipated (illness), may influence grief and enduring effect • Indicates that these women may be of a 'certain mindset'; willing to share experience • According to Smith et al. (2009), the process of IPA analysis may be better understood following the completion of the first study • Interviews may be too non-directive and responses therapeutic rather than exploratory

3.9 Ethical considerations

The safety and wellbeing of participants is at the heart of ethical research and was paramount to my study (Bond, 2004). Hennick, Hutter and Bailey (2011) suggest that the sensitive,

emotive nature of qualitative research can lead to a number of ethical issues and I was mindful that participation in the study should not have negative effect (Smith, et al., 2009).

The table below details the measures taken to avoid harm to participants.

3.9.1. Table of Ethical Considerations

- Ethical approval was gained from the University of Chester
- Research was approached responsibly; with respect and a duty of care to minimize risk to those involved (McLeod, 2015).
- University of Chester's Research Governance Handbook (2018) informed the research
- BACP ethical guidelines for research (2018) were adhered to during the research process
- Selected participants were entirely voluntary
- Participants were provided with information detailing the nature of the study. This included possible outcome and use of verbatim extract; their anonymity, by use of pseudonym (Bond, 2015); and risk and benefit of their involvement (appendix 2).
- Participants were informed about the necessity of taping the interview and a signed consent was obtained prior to interview (Sanders & Wilkins, 2010), although consent was rechecked as a continuous process throughout the project (McLeod, 2015).
- To limit anxiety, interview questions were provided to participants beforehand and interviews conducted empathically.
- Participants were required to judge themselves as sufficiently grounded in their experience, but I was acutely aware that questions may trigger memories and feelings that may be distressing, leaving participants in need of support.
- With a desire not to 'hit and run', semi-structured interviews allowed time to explore feelings, and the interview was 'managed' to end on a positive note (appendix 5).
- Time to debrief was factored in, and participants were provided with the contact for Cruise counselling service and several optional support groups.
- In accordance with good practice, all communication took place via secure email and recordings were transferred to a password protected laptop (Bond, 2015) and stored on Chester University OneDrive.
- Thereafter, transcripts were sent to each participant for review.

- Right to withdraw up until the point of writing up was reiterated (Smith et al., 2009).
- Only researcher and supervisor had access to the raw data. However, participants were informed that the dissertation would enter the public domain (Flick, 2015).

Throughout the process I have been mindful of self-care. I adhered to 'lone worker practice' and was aware of potential risk to me as researcher. At times, painful memories were triggered. However, during counselling training, I have spent time on personal development around this subject and was careful to make use of a reflexive journal and personal counselling. I also had access to clinical supervision and the support of my research supervisor. Furthermore, I believe that each participant felt that the interview had been a 'therapeutic exercise'; they had chance to talk about their feelings, felt validated and that they had contributed to something of value.

Chapter 4:

Findings

4.1 Introduction

The retrospective experiences of four individuals who had lost a mother (by death) during adolescence were qualitatively explored from their individual perspectives.

With an abundance of data, searching for themes across cases was challenging. Some themes were immediately apparent and strikingly similar across cases, whilst some took time to develop. However, IPA analysis, using participants' own words and an evolving freedom of interpretation, connecting emergent themes began to tell its own story and led to the development of 5 super-ordinate themes.

4. 2. Table of super-ordinate themes

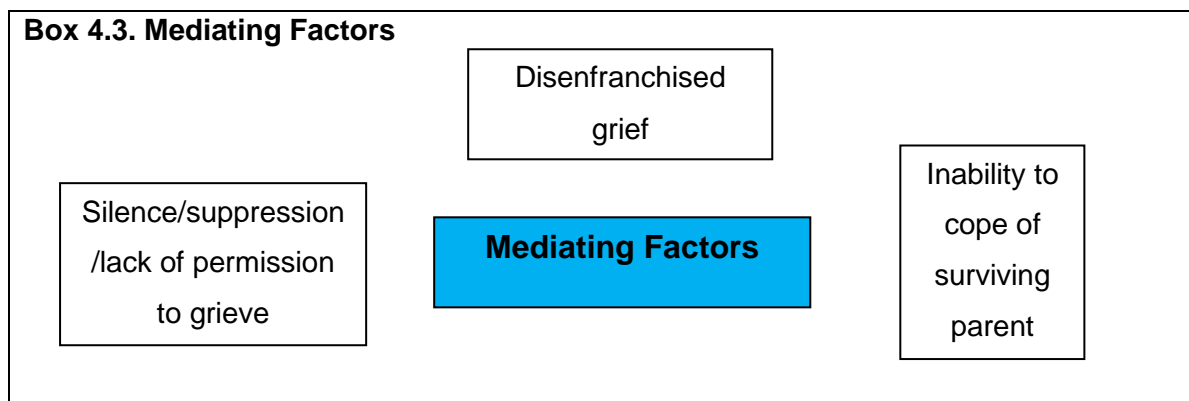
Super-ordinate theme
A. Mediating factors
B. Psychological consequences
C. Non-finite losses
D. Parenting
E. Positive aspects of emergent self

The following section consists of a narrative account, demonstrating the findings that emerged from the complex process of data analysis. The super-ordinate and sub-themes are presented, evidenced by extracts from participant interviews, ensuring validity and quality with the representation of each participant (Smith et al. 2009).

4.3. Mediating factors

The research question focussed on the enduring effect of mother death. A mediating factor is a circumstance that may influence or exacerbate vulnerability in grief, which, in turn may increase the possibility of complicated grief and effect on adult life thereafter (Rando, 1993; Anderson, 2012).

All participants felt that the death of their mothers and subsequent grief ‘journey’ had been influenced by the following:



4.3.1. *Inability of surviving parent to cope*

All participants reflected on their father’s difficulty to cope following their mother’s death. The father’s grief was incapacitating, which resulted in a secondary, symbolic loss. This led to the women assuming the role of their mothers, ‘parentification’.

Anne said:

“his reaction was to not cope... I was living on my own in the house because my dad didn’t come back in from work”, “a lot of the housework ended up on me”.

Kate remembers her father’s grief:

“it was almost too much for him to have to talk about”, he was “always somewhere else...bit distant”. She recalls staying “with him for two years and looked after him, cooked for him”.

Helen’s father:

“started drinking to fill the void really”. She recalls being catapulted into an adult role; “I suddenly felt like the matriarch with my sister and my dad”.

Heidi felt that her

“dad didn’t cope that well”, reflecting on his grief, “He couldn’t cope with it”. “He wasn’t there”. She described how she took on the role of housekeeper, “You would come in from school and make the dinner or you would light a fire”. “We were basically bringing ourselves up, which is horrendous”.

4.3.2. Silence

All four participants focussed on the absence of open communication and difficulties caused by a lack of ‘permission’ to grieve.

Anne explained:

“I do remember my dad didn’t talk to me”, “I ... remember shouting at him once and saying, “You don’t talk to me anymore”.

Family members imparted strong messages of silence and adults led by example; Kate said:

“children had to be seen and not heard in my house”, “I felt I couldn’t talk to him about such things”.

Helen spoke of the suppression she felt sitting with her mother as she died:

“I still wanted to say things, but I wasn’t allowed to say anything”.

When Heidi’s mother had died, she was told by a family member:

“don’t cry, you’ll upset your grandmother”, and reflects that hers was “very much a family that you don’t talk about this and you don’t talk about that... That was very detrimental”.

4.3.3. Disenfranchised grief

All participants spoke of a sense of being overlooked when their mothers died; the enormity of their pain and grief unacknowledged.

Anne said:

“I went back to school the next day”. Referring to her grief at home with her father; “he just thought... it was being a teenager; it was being a horrible teenager”. As she struggled with anorexia, “I went down to seven stone and dad didn’t really notice at all”. She remembers an overwhelming message, “I think the legacy of that was ...you had to toughen up, that you had to kind of get over it, you had to just cope”.

Kate remembers feeling ‘unimportant’:

“I was left out a lot”. At her mother’s funeral, she “didn’t have a role to play. It wasn’t about me”.

Helen’s recalls her mother’s illness and death being shrouded in secrecy:

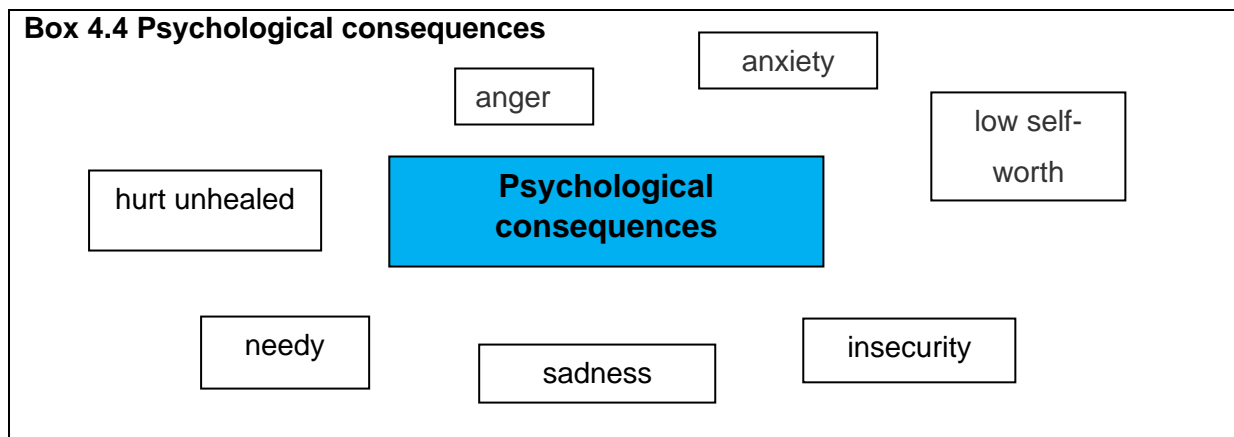
“I think it was all because we didn’t get the real story...we weren’t allowed to say goodbye”.

Heidi remembered her ‘invisibility’, how her feelings were ‘disregarded’:

“what was dreadful ... they’re discussing her death... they were discussing it over our heads”. She continues, “how ... her death ...turned our lives upside down was never ever discussed. It was almost as though... it was their grief and not our grief, but their lives continued. Ours didn’t. Ours stopped really with it”.

4.4. Psychological consequences

When questioned about the ‘perceived impact’ on their adult lives, participants responded with how they believed the loss of their mothers had resulted in behaviours and thinking that led to certain emerging characteristics. The women talked about being changed by their mother’s death; a sense of being different, or ‘altered’ by their experience.



4.4.1. Hurt healed

For participants, their mother’s death was synonymous with the end of their childhood and their linguistic comments added to their descriptive narratives. Although they spoke of their ‘survival’, their powerful use of language evoked a sense of ‘stumbling’ and ‘trudging’ through life, feeling disadvantaged, damaged, broken and healed.

Anne described meeting her father’s new wife:

“that kind of fractured something in me”, and of life without her mother, “surviving without your mum... that’s your normal”, “I kind of limped on like that”.

Kate described feeling *“broken and incomplete ever since”*. She said:

“it’s been a struggle. I have struggled and I’ve clung on despite it all, yes. Trying to find my way through the mire, that’s what I’ve been doing...”.

For Helen:

"I dread each day. That's why I don't sleep well at night. I dread each day", "I survived it... I have".

Of her mother's death, Heidi said:

"it's appalling and it's damaging and it's irreplaceable", "It's amazing that (many) years on ...it's still raw and it's still dreadful...That hurt never truly goes away... It still hurts. It's still quite dreadful". She described that time as *"horrendous"* and adds that her *"world came crumbling down"*. Her mother's death was *"like an explosion in the family...it was life-changing"*.

4.4.2. Low self-worth

All participants spoke of issues involving low self-esteem and self-worth. They talked of feeling inadequate and the impact on their lives.

Anne said:

"I'll follow someone else's lead quite a big lot....if someone decides that is the right thing to do", demonstrating her lack of self-belief. Of a previous relationship, she said, *"he told me ... I was not going to be the woman he stayed with, that he was going to leave, and I was accepting of that because people leave"*.

Regarding work, Kate said:

"I've always felt, even though I'm quite well-qualified, every job I've had I've felt like an imposter, I'm not good enough"; her inability to believe in herself, *"she thinks I've done terribly well. (She says) you're amazing...I don't believe it."* Her musings about aspiring to follow her mother's footsteps; *"I wanted to be like her, but knew I couldn't be because I wasn't intelligent enough",* and how she feels defined by her roles in life, *"I feel I've got no identity unless I'm doing something... if I'm not planning something... I feel inadequate"*.

Helen reflected that despite her effort, she often lacks self-worth:

“I want to be as good as I can be at anything. I always think I’m crap at that, crap at that”; her sense of failure regarding a previous relationship, “I wanted my 25th silver wedding anniversary... I was living a lie really”.

As she discussed motherhood, Heidi reflected that *“I don’t think I was a good mum”*.

4.4.3. Anger

Feelings of anger and indignancy were voiced by all participants. A sense of unfairness and injustice, particularly in relation to mediating factors.

Anne recalled:

“the mistakes that were made, and it was mistakes; ...they failed ...failed to look after me and they shouldn’t have”. She described her resentment seeing others take their mothers for granted, *“you have to understand how lucky you are to have a mum ... you have to appreciate what your mum is doing for you”*.

Kate reflected how being expected to ‘perform’ the role of grandparent could leave her feeling aggrieved and indignant:

“now I’ve got grandchildren and we’re expected to help with the grandchildren, nobody ever helped me with my children, ever”.

Looking back, Helen felt a sense of anger and injustice:

“I can’t get over the fact that she didn’t know she was dying; she wasn’t given the opportunity to say goodbye...she was robbed of that”.

Heidi described her indignancy about how the family ‘dealt’ with her mother’s death:

“what I’ve always resented since ... the most damaging thing is the death of mother at my age. The most damaging was the way the family coped afterwards... There

were things that happened which shouldn't have happened". She continues, "There was always that silence... always that resentment".

4.4.4. Insecurity and lack of trust

When interviewed, all participants vocalized feelings of insecurity and lack of trust.

Anne talked of an ontological insecurity:

"you can't trust anybody not to die, you can't ... whatever you put your faith in, it just goes. There's nothing in trust, in trusting someone that can... stop you from losing them so why trust because nothing can stop them".

Kate talked about being aware of her insecurity, but that it was seldom seen by others:

"I'm a bit insecure in my identity, and I put on a good front".

Helen shared that her insecurity had precipitated her first marriage:

"I jumped in there with both feet and got married just because I wanted to be secure".

Heidi reflected that feeling insecure had given rise to a sense of vulnerability:

"the insecurity and the way it leaves you, making you vulnerable...I think if your mother dies at X, it's going to make you a bit emotionally insecure". She explained, "I think that from the moment... I didn't feel safe... that that world where ... that's the word, safe. That world where your mother was".

4.4.5. Anxiety

All participants were affected by anxiety during their lives following their mother's death; from excessive worry and fear, to health and death anxiety, which translated into various explicit or implicit coping mechanisms.

4.4.5.1. Excessive worry

Anne talked about her worry of passing on her anxiety to her son:

“I worry, worry that I’ve passed this on somehow... he knows my mum died so for him mum’s die, mum’s can die, and he knows that”

Kate said:

“I worry a lot, and I plan a lot, a bit of a perfectionist... I worry about other people”, “I think I’ve got an underlying anxiety all the time”.

Helen remembered when her worry and anxiety started:

“I remember having a conversation with myself thinking I just never worried. I never worried that she was going to die and, therefore, I taught myself to worry”.

Similarly, Heidi said:

“I did always suffer from anxiety, no question about it. Anything which pushes you a bit, I was quite fragile probably ... definitely depression”.

4.4.5.2. Health/death anxiety

Anxiety over personal health was significant for three of the participants. They described their fear for their own health, particularly in relation to the potential impact for their own children.

Anne explained her anxiety regarding her belief in fate, that hers would follow that of her mother:

“well, it doesn’t matter because I’m going to be dead. I’ve got a lump and I’m going to be dead”; her worries as she approaches her mother’s age of death, “that’s significant ... somehow something will happen and I’m not going to get to ...the age she was when she died, somehow something will happen”.

Helen agreed:

“there is a huge element of anxiety that this could happen to me. The same thing could happen. I’m paranoid... I go to the doctors so often”.

Similarly, Heidi said:

“I’ve always been very health conscious. If ...I got a migraine, it was going to be a brain tumour. In other words, I’ve had ... dreadful health anxiety”.

4.4.5.3. Coping mechanisms

All participants reported various ways of coping.

Anne attempted to relieve her distress by employing several coping mechanisms:

“I started self-harming ...mostly burns... I took myself to the doctor and said, “I’m not coping”, then, “I became anorexic, so I stopped eating all but one meal a day... so I kind of limped on like that”.

Kate said of her anorexic episode:

“it was a control thing ...I needed...I couldn’t cope with all this feeling, you know, totally isolated, so I had to control something, and I suppose that’s what I did”.

Helen said her anxiety was less when she felt in control:

“I drive everybody crazy because I just have the tiniest detail”. She went on to explain, “I felt like I was out of control with my mum, and I think it’s just me having control of everything”.

Heidi’s anxiety translated into panic attacks and insomnia:

“I started to suffer with anxiety badly ...and I did start to suffer from panic attacks...then I had anxiety sleeping”.

4.4.6. Neediness

All participants reported feeling 'needy'. They all possessed an intense yearning for comfort and security.

In attempting to create the safety she desired, Anne said:

"I make myself safe, I will make myself safe and I will not push further." "I would appear to be hugely confident but then I have to ...retreat and bring all my borders in".

Kate yearned for the security of a mother:

"just needing to have somebody to come and put their arms round you and tell you everything is going to be fine". "I've always subconsciously ...liked older women friends... obviously mother figures".

Helen needs people around her to provide the security she craves:

"I can't stand losing touch with people... I just like to know that I've still got people... I need to have them in my life... it's probably because I think if this happened then who could I turn to. I've got this huge safety net I build".

Heidi identified her need:

"you need a mother substitute. You need emotional support. You need somebody".

On a personal level, she said, *"I had the need for family ...I was more vulnerable, I was more needy probably".*

4.4.7. Enduring sadness

Undoubtedly, despite the many years since their mother's deaths, all participants harboured feelings of wistful sadness and became emotional throughout the interview. However, with the

passage of time and the experience of motherhood, three of the participant's sadness was seen through the eyes of their mother.

Anne described the empathy she felt with her mother:

"it was almost like it was her sadness, it almost wasn't my sadness, it was like my mum's sadness... that she's missing it, that's she's missing it and she'd have loved it".

Kate's sadness was twofold:

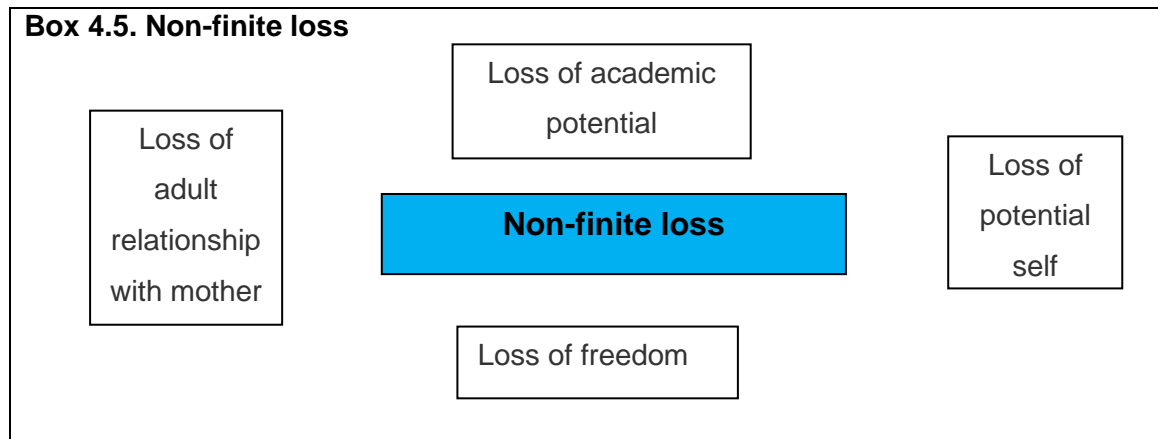
"She was in the prime of her life, she was 44 years old and I feel so sorry about that for her; sadness for her as well as for myself".

Helen felt sad about the secrecy around her mother's death:

"You know what it's like when you get to that age and you think, if it had happened to me".

4.5. Non-finite loss

Non-finite or enduring losses were experienced by all participants. Precipitated by their mother's death, participants endured the pain of loss time and again, often in reaction to intangible losses. Subsequently, the women were required to make continuous adjustments throughout life.



4.5.1. Loss of adult relationship with mother

The enduring sadness felt by participants included regret for not having an adult relationship with their mothers.

Anne pondered:

"I don't know what she was like. I don't know who she was... I didn't have her through boyfriends or relationships or that kind of transitioning to college she wasn't there". "She's missing from my life, and that makes me wonder about what life would be like with her there".

Kate said that she often contemplated:

"what she would have been like now, for instance, if she was still alive, what would she be saying? What sort of relationship would I have with her". "In a way, I don't feel

I knew her that well, you know. I only knew her as a child. I'd love to have got to know her as an adult".

Helen shared her curiosity:

"there are times when I think, what would she say now. Would she approve of my relationship ... living here and not being married?"

Heidi lamented:

"I never had an adult relationship with her". "I never had all of that history. All of that was lost ...so much was lost, and we lost so much". "to have had her around ...would have been a gift. It would have been fantastic; I am jealous sometimes of people who have a mum".

4.5.2. Loss of academic and career potential/achievement

All participants felt that their experience had affected their academic success and career path.

When offered a job that required travel, Anne refused, felt uncomfortable, filled:

"with fear, the idea that you'd leave and travel".

Kate reflected that:

"Maybe I'd have got better grades". She adds, " I didn't even get GCSEs, you know? And again, that may have been because of what happened".

Helen aspired to:

"go back and finish the degree, and I really wanted to go and live in London to work, but I didn't think I could".

Heidi remembered:

"I left college after about three or four months. In other words, I couldn't settle. At the time, you're too young to process why. I look back now, and I know I was still grieving for my mother".

4.5.3. Loss of freedom

As a result of their experience, all four participants felt that some aspect of freedom had been lost due to their own fears, insecurities, uncertainty or sense of obligation.

Anne had limited her life:

"I put limits on what I do, I don't push myself as much as I could do, as I could have done." "I'm an extrovert but fear, yes, the fear of what might happen puts these very tight rings around areas of my life".

Kate said:

"the lack of concentration, all those books, everywhere, I'd love to read them... but I can't"

Helen had felt a sense of obligation to care for her father, on behalf of her mother:

"I do feel like she would want me to look after my dad, but I... wish she'd told me. I wish she had said, right, shit is going to happen and you're going to go out there and live your life still... You've got to go and live your life. I'll never do it... I'd be frightened that it might go wrong if I did it".

Heidi had opportunity to travel with her husband:

"I could have gone around the world with him, but I was having a baby. That was more important. Of course, I must have been mad, but that's how I felt, ...that is to do with nest building. That's to do with wanting your own little world".

4.5.4 Loss of potential self

Pondering non-finite losses led the participants to reflect upon their 'altered selves'. There was a sense, from all women that the traumatic event of their adolescence, had altered the trajectory of their lives, *and* the person they became.

Anne reflected:

"I wonder if it's ...who I am underneath, the kid that had nothing, none of this happened, I think I would have been quite extrovert, quite a bold person and then this thing happened and it stopped that, it stopped some elements of that but underneath there's quite a bold person".

Kate considered:

"I think in a way it's changed me". She added, *"in my developmental stages ...that's what I mean by missing out on a developmental step, because it's a huge thing going through adolescence ... Ever since then, I have felt just sort of broken, really. I've not been a whole person; it's almost like it needs to define me, because me, myself and I is just not...well, I don't know, yes, I guess it's that word incomplete again".*

Helen contemplated:

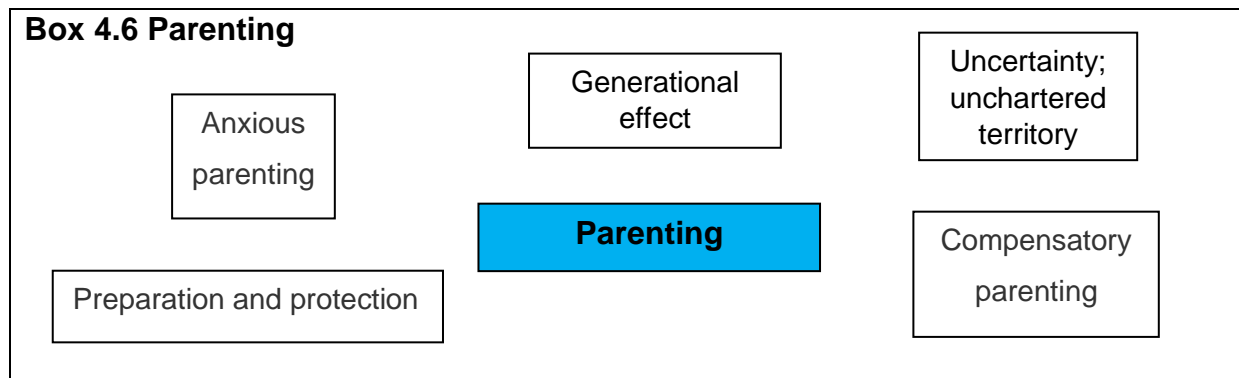
"had it not happened, where would my life have been. I would have probably not studied in X. I only studied there because it was close to home and I could go back to see my dad... My route would have been so different.... I would probably have had a little inner hippy come out in me".

Heidi reflected:

"I think when that happens to you at that age you go back ... puberty, it definitely stunts part of something... I do think that when that trauma happens, part of you, no matter how mature you may have been since and dealt with all sorts of things, which obviously I have, part of you is still (a teenager)".

4.6. Parenting

The research question asked participants about the perceived effect (of their mother's death) on the parents they became. All participants were mothers and some remarkable commonalities were revealed during data collection and analysis.



4.6.1 Anxious parenting

Two of the four participants perceived themselves to be anxious parents.

Anne's anxieties focussed around health and fear that her children would end up motherless as she was:

"frequently ... I've been worrying about something and I've felt ... what do I do with the kids, how do I tell the kids, you know, I've been so convinced that I've got something like running through my head... I'm so, have been for years, so convinced that I will die ... and my children will be as me".

Helen's children recognized her anxieties as a parent:

"They say I'm really anxious. I know (son) says that ... he will take the piss out of me because I say that I'm worried about everything... I've got to have this perfect family that nothing ever goes wrong".

4.6.2. Uncertainty

All respondents felt a degree of uncertainty in parenting, connecting this with not having a mother and guiding role model.

Anne felt the absence of a role model:

"I don't know how she parented; I don't really know... I've got no idea". When she had her first child, she looked to others for guidance, *"I thought I'll do that, that seemed to be fine, I don't know anything else".*

Kate shared her frustration with aspects of uncertainty, which were pervasive to her being a grand-parent:

"I feel I don't know how to be a grand-parent and to converse with them on their level".

Helen said:

"I don't think I've got real role model because I can't remember her. I just remember the odd bit of baking.... but I've got nothing to copy." She added, *"I do often wonder, what should I doing here. I feel a bit out of control in that sense".*

Heidi reflected:

"the idea of having a mother figure when you're having a baby must be absolutely fantastic and I didn't have that... I didn't actually have anybody".

4.6.3. Preparation and protection

Three participants felt they attempted to protect their children from the hurt they had suffered by 'preparing' them.

Anne found herself preparing her children for her own death by leaving them messages of love:

"You know mummy will love you and you know that daddy will look after you and if I'm not here it's not because I don't love you but you will be okay". She believed, "they need to learn how to do stuff so maybe that's preparing them as well... they need to learn how to look after themselves because I had to".

Helen had tried to prepare her son for her death and had "written notes" for him:

"I've always thought what if I die when they were little. You just want to be in total control... You can never be so unprepared for something".

Heidi reflected:

"I had a bit of control. They did help in the house and I thought it was good that they did. I think that goes back to the fact that ... I had nobody mollycoddling me".

4.6.4. Compensatory parenting

All participants had attempted to compensate for what they had lost.

Regarding her daughter, Anne explained:

"I'm desperate she's not weak... so maybe I am shaping her... I want her to feel strong, I want her to feel resilient, I want her to feel that she can deal with life".

Kate had been determined to give her children the love and nurturing that she had lacked:

"I think I probably did strive... I was determined...yes, to give them lots of love ... I wanted them to have so much love, yes, I did... I was very touchy-feely with my children... and to tell them all the time how wonderful they were".

Helen agreed, of her parenting style:

"I wanted to put the maximum in, and never be able to say that I hadn't done enough". "The last thing I would have wanted was to cause any sort of disruption to a family unit. It happened to me. Why would I want to do that to my kids".

Heidi reflected:

“Looking back, I think I was a bit harsh. I wanted them to achieve what I hadn’t. I wanted them to be more independent than me and to travel”.

4.6.5. Generational effect

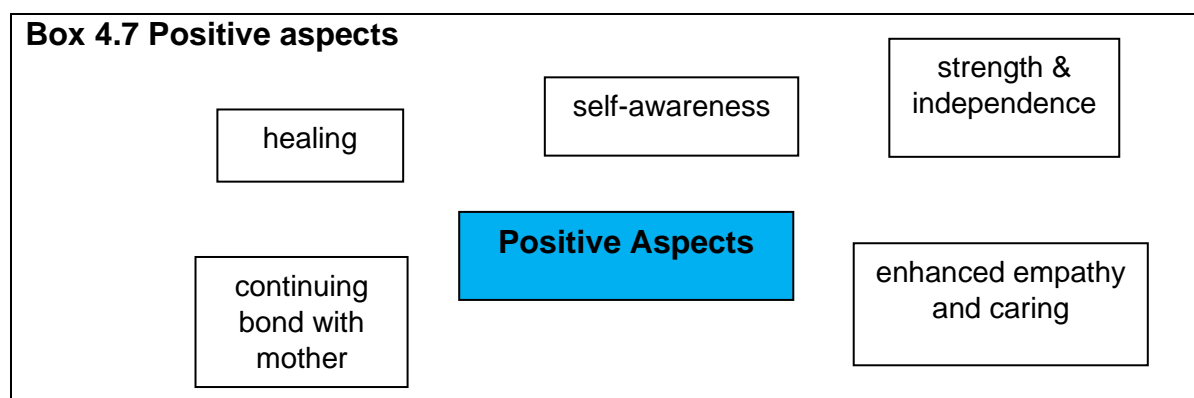
Two participants remarked on how their parenting style may have affected their children and grand-children.

Helen said:

“It carries on through the generations... They can’t even be free”. “It’s not just how it’s affected me. It’s him as well. How will it affect his kids?”

4.7. Positive Aspects

Participants were asked if anything positive had come from their experiences. All participants could identify elements of healing and positive aspects of themselves emerging from their loss.



4.7.1 Healing

All participants spoke of some form of healing, sharing what had helped their grief process in retrospect. All women found solace in connection with people, whether a life partner or close

female friend. Two women found motherhood significantly healing. Comfort was found in music, nature and talking (with professionals and friends).

Anne said her friend:

“got me through, she just took over”. Music and counselling were helpful; “counselling service ... really kind of got me to start dealing with it “.

Kate found comfort in her (future) husband and the *“shared identity”* she felt with her sister. Being with nature helped, as did motherhood:

“that was my way of grieving ... I just love the countryside and trees”, and “having a child was the best thing I’d done in my whole life.” “it’s healed a void, yes ... because then it becomes your family. That’s your centrepiece”.

Helen found solace in talking about her loss:

“I talk to people about it... because the anxiety has been such a huge problem”.

Maintaining connections with friends has helped, *“friends mean a lot to me”, “I think being with the right person was part of the solution...everything had been so negative, to be with somebody that sees the positive in things and says let’s not worry...”.*

For Heidi, a sense of belonging and talking brought comfort:

“I formed relationships and friendships... gave me a feeling of belonging and... I realised that it helped keep anxiety and depression at bay”. With motherhood, “I’m here for my daughter when she needs help ... in a way that nobody was for me... I enjoy the fact that I’m filling a void in her life”.

4.7.2. Connection with mother

All participants felt some continuing connection to their mothers, which they found consoling.

Anne felt her mother's presence:

"like she'd walked through me, like she moved through me".

Kate felt that her mother had become integrated within her:

"I do feel that she's part of me, absolutely...I've had to come to this realisation ...we are our parents and our siblings, we are".

At times Helen felt she could hear her mother's voice:

"I knew my mum would be saying get the hell out of there".

Heidi felt a connection with her mother through their similarities:

"I'm very into clothes. My mother was into clothes, I remember." "in a way, she will always live on in me because how can she not live on in me".

4.7.3. Self-understanding

All participants possessed a deepened self-awareness. It was comforting for the women to understand themselves.

Anne reflected that she saw herself as:

"stronger in a lot of ways, weaker in a lot of ways", "there's an acceptance ... as well as it being a fearful way to be ...there is an acceptance of reality now", "I can pick it apart a little bit".

Kate said of her journey towards understanding and self-acceptance:

"because it reflects back on why I am like I am. You have to dig a bit deep, don't you?" "I realised ...the you is the essential you inside, and you've got to learn to value who you are essentially".

Helen; *"had to think about why I am like that".*

Heidi referred to the:

“ripple effect”, that had “made me fragile”. She reflects, “When death comes early like that you can’t process the death. You haven’t got a clue about the implications and you can’t articulate your feelings (then)”.

4.7.4. Enhanced empathy and care

All participants felt they possessed positive attributes resulting from their experience. Three participants experienced greater empathy and one caring.

Anne felt enhanced empathy for others:

“I understand, I think, people more who’ve been through this”.

Kate agreed:

“I think having that happen ...has made me very empathetic to other people who may be in pain”.

Helen said of her mother:

“She really cared about people... she’s taught me that”. “I think I always cared about other people”.

Heidi said:

“I probably have empathy for people who are going through difficult situations”. “The impact has been horrendous, but it’s given me empathy”.

4.7.5. Inner strength

All interviewees felt that they had become ‘strong’ and had acquired resilience as a result of their experience. This led to liberation in motherhood and independence.

Anne said:

“there’s quite a big deep resilience and then there’s a crack about health, my health, my kids’ health”. She had had to become independent, “you don’t rely on a mum ...I’d sorted myself out and I looked after myself”. Of motherhood, “I’m stronger in myself in that I don’t rely on a mum and I feel perfectly okay with doing things my way with the kids”. “I felt quite liberated ... I’m just doing it this way; this feels right for me and I’ve parented differently”.

Kate had:

“a lot of confidence being a mother”. She said, “these things make you very strong, I think because you’ve been in so much pain, and again it’s a very personal sort of pain, it’s not the sort of pain you can describe, if you’ve been through pain like that, pain...nothing, you know? You can cope with it...I’m just strong, you know? I really am”.

Helen reflected how she rose to the challenge of parenting and mothered by instinct:

“I absolutely loved it and felt that I was being as good a mum as I could be. I know it was challenging, but I was doing what I felt was right”.

Heidi considered:

“I think that you need quite a strong woman to do that when you don’t have a mother figure”.

Box 4.8: Master table of themes for the group

Super-ordinate themes	Sub-themes
A. Mediating factors	Inability to cope of surviving parent Silence; suppression Disenfranchised grief
B. Psychological consequences	Unhealed hurt Low self-worth/esteem; feelings of inadequacy Anger Insecurity Anxiety <ul style="list-style-type: none"> • Excessive worry • Health and death anxiety • Coping mechanisms Need and yearning Sadness for self and mother
C. Non-finite losses	Loss of adult relationship with mother Loss of academic achievement Loss of personal freedom Loss of potential self
D. Parenting	Anxious parenting Uncertain parenting Prepared & protective parenting Compensatory/vicarious parenting

	Generational effect
E. Positive Aspects of emergent self	Healing Continuing bond with mother Self-understanding Enhanced empathy & caring Strength and resilience

Chapter 5:

Discussion

This study questioned the perceived impact of a mother's death during adolescence on a woman's adult life and the parent she became. The selection criteria meant that all participants were at least forty years of age, giving a sense of retrospective perception as they reflected on the questions asked. The findings of the research comprised of five superordinate themes which emerged with remarkable similarity for each participant.

In accordance with Rostila (2015), all participants reported being profoundly affected by their mother's death, and contrary to claims made by Tennant (1988), in Maier et al.'s (2000) study, still bore the scars of loss, with raw emotion surfacing as they talked of the experience of losing their mothers, some 30-60 years ago. The subsequent findings went further to suggest that the effects of mother death in adolescence are pervasive and endure into adulthood and beyond.

Throughout the research process I have been mindful and reflexive; aware that my own understanding of mother death may 'colour' analysis or 'shape' the findings somehow. However, *because* of my experience, I was more sensitive to deeper meanings behind words and, due to interview style and my counsellor training, participants were able to 'tell their stories' without hindrance. Nevertheless, my subjective involvement must be acknowledged with respect to selection of pertinent super-ordinate themes.

The following chapter examines the study findings within the context of the previously reviewed literature.

5.1 Mediating Factors

This study highlighted the significance and damaging effect of mediating factors in participant's narrative of loss and grief. All participants reflected that their loss experience and subsequent impact, had been shaped greatly by the context in which it occurred.

All participants indicated the notable role of their fathers following their mother's deaths. All cited their father's grief and poor coping skills as a detrimental factor in their grieving process, suggesting that the remaining parent's coping style *is* vital. This supports the work of Ellis et al. (2013) and the concept of 'double jeopardy'; the loss of the mother and the secondary, symbolic loss of the father, a form of double impact. The fact that fathers were 'absent' meant that a form of parentification befell each participant; as Worden (1996) suggests, exacerbating impact of loss. Assuming such responsibility at a young age may engender a sense of capability but may be accompanied by a sense of having 'missed' an aspect of development. Endelman (2014) explains how this may confuse emerging identity or risk feelings of 'incompleteness'.

All participants were affected by implicit communication rules, or 'cultural silence', as described by James (2003); given strong messages of stoicism and silence, recounting the absence of their father's open grief and the subsequent influence on their expression of feeling as they became complicit in silence. Expounded by Thompson (2012) as 'setting the tone' for grief, this 'rings true', as participants expressed a lack of permission to grieve, resulting in suppression of emotion. The damage caused was acutely felt; silenced, but still grieving (Endelman, 2014). An absence of 'openness' contributed to participants feeling 'disregarded', somehow less important, invisible; their grief disenfranchised. Misunderstanding (Shultz, 2007) and a lack of sensitivity or a desire to shield, as described by Abrams (2013) may account for this. It may also relate to the era and the 'dated' perception of childhood grief.

5.2 Psychological Consequences

This study draws attention to the devastation and subsequent changes in psyche and character in adult women following mother death in adolescence. This finding supports and contributes to the abundance of quantitative research, such as Hollingshaus and Smith (2015), and Marks et al. (2007) that indicate a link between parental death in childhood and psychological change.

During interview, in accordance with Lowthert (2016), all participants reflected that their mother's death brought about the end of their childhood and spoke of an enduring hurt and a sense of being broken; an unending struggle, also described by Harris and Gorman (2011). Mack (2004) elucidates: the hurt sustained in adolescence becomes formative, resulting in low self-worth, lack of confidence and feelings of inadequacy which were reported by all participants in my study. Disregarded in their grief, according to Edelman (2014), damaged self-worth and self-esteem result.

This study uncovered lingering feelings of anger and indignancy in all participants, particularly in relation to mediating factors. This is echoed by Mannarino and Cohen (2011) and in Luecken and Roubinov's (2012) study, where a connection between chaotic environments and poor self-regulation was documented, while Edelman (2014) stressed the cruciality of the surviving parent and potential for resentment thereafter.

The rupture of childhood equalled the loss of 'assumptive world'; participants reported a dissolution of trust, safety and a fundamental insecurity (Harris, 1995; Edelman, 2014). Despite feelings of insecurity and fear, participants revealed how they maintained their 'exterior' or a 'good front'; Rando (1993) describes this as a form of self-protection, a way of keeping feelings safe. This is consistent with Siegel and Hartzell's (2014) statement that insecurity is an indicator of unmet needs as a child.

This research highlighted a profound sense of anxiety, worry and fear in all participants. Termed “ontological insecurity” by Thompson (2012, p. 80), participants’ anxiety manifested in different aspects of living. All were aware of their anxiety, and some concerns centred around how this may have affected their children. Fear of personal mortality in adulthood is common (Christ, 2010). Three participants had health anxiety, and worried that history would repeat itself. They predicted shorter life spans and spoke of ‘comparative death timing’ (Harris, 1995), which has been previously documented (Denes-Raj & Ehrlichman, 1991; Edelman, 2014); fearful that their mother’s fate would befall them. In all participants their issues translated into significant internalizing or externalizing coping mechanisms such as anorexia, self-harm and control issues, concurring with the other studies (Hoeg et al. 2016; Gersten et al. 1991; Worden, 1996).

The findings of this study conveyed an intense ‘neediness’ in women bereaved of their mothers. It appears that both loss of their “primary attachment figure” (Howe, 2011, p. 12), and context, rendered the women bereft and needy of affection and security (Bowlby, 1980). All study participants experienced a yearning for comfort, safety and emotional security that perhaps had been lacking in their early lives, with a desire to fill a ‘void’, as Lowthert (2016) maintained.

Contrary to the findings of Stikkelbroek et al. (2012) and Lueken and Roubinov (2012) that psychological distress of early parental death resolves over time, this study revealed an enduring wistful sadness, and, as Kauffman describes, a sense of being “unhealed” (2011, p.43). Furthermore, this study contributes an important aspect to the growing understanding of this phenomenon; with the passage of time and experience of motherhood, the participant’s sadness ‘changed shape’, evolving to become twofold; a continuing sadness for their losses, and an empathic sadness for their mother’s loss as a woman and mothers themselves. Becoming a mother appeared to engender the sense of connectedness with their mothers described by Rando (1993).

5.3 Non-Finite Loss

The chronic sadness described by participants encompassed the many losses perceived throughout their lives, including regret for the 'adult relationship' with their mothers that would never be. Participants experienced continuous mourning for the many losses, past present and future that this represented. Their mothers were missing for many life events such as graduation, marriage, birth of children, relationship problems, sickness and menopause. Participants felt jealous of people with mothers and were aware of the magnitude of their loss. Worden (1996) expounds: severance of the mother-daughter bond means the loss of many different relationships. This left women with a sense of incompleteness (Harvey, 2002). All participants possessed a sense of wonderment for *who* their mothers were and what life would be like if she were present.

Such sentiments developed into ponderings about participants' perception of their loss of 'self'; they agreed that aspects of themselves had been lost in the wake of childhood trauma. All participants acknowledged their experience had affected their academic accomplishment which accords with other study findings (Mack, 2004; Parsons, 2011; Servaty & Hayslip, 2001; Edelman, 2104). Furthermore, participants concurred that, in the wake of grief, an element of freedom had been lost due to their own fears and insecurities. This is echoed in work by Worden (1996) and Humphrey and Zimpher (2008), who recognized that with loss and ensuing anxiety, risk taking may become unlikely, limiting the realization of full potential.

A notable finding emerging from the study was participant's concept of 'who would I have been', had they not experienced adversity. For all, there was a perception of change in their life path and, who they had become was 'altered'. Two participants related this way of being to their adolescent life stage and felt that their development had been 'stunted' in some respect, reflecting Edelman's (2014) work regarding 'arrested development'. Shultz (2007) identified that loss may cause a rupture in developmental tasks and Edelman (2014) suggests that aspects of personality may become halted or restricted; the girl developing into a woman,

retaining characteristics of the life stage she was at when she was bereaved. Interestingly, *all* participants were aware of this change in themselves; they all possessed a general sense of uncertainty of self, questioning their potential identity and how loss had impacted *who* they had become (Abrams, 2013). As Harvey (2002) suggests, identity *is* changed by loss.

5.4 Parenting

The research question aimed to discover if participants perceived their experience to have affected them as a parent. A strong connection between the 'event' and subsequent effect on motherhood was found.

This study highlighted how participants felt the psychological effect of motherloss in adolescence had 'overshadowed' their parenting, corresponding to the (1994) findings of Zall's study. Half of participants recognized themselves as 'anxious mothers'; all experiencing a deep-rooted sense of uncertainty. In her (2006) study, Edelman found that 'motherless mothers' may be preoccupied with the possibility of their own death and leaving their children without a mother. This was reflected by participants who feared that they would die, and their children would face the same fate as they had. Edelman's study also indicated mother's concerns about not knowing 'how' to mother. This sentiment was strongly echoed in my study. Although Keenan (2014) offers that uncertainty in motherhood may be associated with immaturity and lack of confidence, only one participant fell into this category, while for others, their uncertainty was connected to an absence of role model or guidance from their mothers. Harris (1995) termed this a 'primary model for parenting'.

This study also draws attention to the pervasive, generational effect of grief and uncertainty. Participants were mindful as to how their parenting style would and had affected their children. There was also a sense of not knowing *how* to mother and *grandmother*, indicating that the effects of early motherloss permeate not only the present, but future generations.

Three participants attempted to purposefully or sub-consciously protect their children from the hurt they had suffered by 'preparing' them for their absence or by ensuring they were able to cope with adversity. Edelman (2014) suggests this may result in the mother 'retreating emotionally'; this was not the case. In fact, all interviewees were 'devoted' mothers. However, aspects of their parenting styles potentially translated into a desire to vicariously repair their own childhood (Edelman, 2006); 'making good' what was lost for them; compensatory mothering. Participants wanted their children to achieve more than they (felt) they had, and to possess characteristics that they believed would protect them, such as strength and resilience. Participants encouraged their children to develop their coping skills, such as independence. The desire for their children to be shielded from the pain of grief or better able to deal with adversity was apparent. This also manifested in the wish to care for their children and provide love and security that perhaps had been missing for them. Perhaps, as Harris (1995) suggested, this corresponds to over-compensatory parenting? Edelman (2006) concurs, suggesting a synonymity with controlling or obtrusive parenting. Perhaps. Perhaps loss and adversity in childhood gives rise to thoughtful, caring competence in motherhood, with their offspring bequeathed with valuable survival skills. Mireault, Thomas and Bearor (2002) suggest that despite the self-doubt and uncertainty experienced by 'motherless mothers', they do the good job they are afraid of not doing, rearing well-adjusted children.

5.5 Positive aspects of emergent self

Concurring with Larson's (2013) suggestion relating to post traumatic growth, all participants spoke of positive aspects that had 'emerged' from adversity. However, all bereavements had taken place 30+ years previously, and, as Harvey (2002) maintained, struggle had taken place to 'gain' indirectly from loss.

All participants were able to identify elements that had helped their healing process. Participants cited 'connections' with people as significant in easing their pain, including enhanced "sibling loyalties", as mentioned by Mack (2004).

Luxmoore (2012) stated that *becoming* a mother may balance the loss of a mother, and Harris (1995) supports this suggesting that, relating to mother death, motherhood may be healing. Two participants agreed that becoming mothers had healed a void within them. Zall (1994) concurred; that having children may mend the pain of the past. Perhaps by recreating the lost mother-child bond, the link that has been missing is replenished, although with this healing comes new aspects of anxiety associated with being a 'motherless mother'.

All participants experienced an internal relationship or connection with their mothers. Study findings concur with Silverman & Klass (1996), indicating that a sense of continuing bond with the deceased is comforting (Harris, 2011b).

This research corroborates previous studies (Apelian & Nesteruk, 2017; Dehlin & Martensson, 2009) in identifying in all participants, positive attributes, such as empathy, caring, strength and resilience as characteristics to emerge from loss. Furthermore, for participants, strength and resilience went hand in hand, bringing with it an eventual sense of liberation and independence, particularly in relation to motherhood. However, mothering, as Harris (1995) notes, is born of instinct and perhaps, without the influence of a mother's presence, women may feel a sense of freedom to really be themselves. Furthermore, strength is not a direct result of adversity, rather, something acquired by necessity when facing profound loss (Edelman, 2014). As Kate said, "*nothing can hurt you again if you've been through pain like that*". Such strength and resilience may develop as a "protective cocoon" (Edelman, 2014, p. 39), a form of self-protection, and really, only a façade of strength. When one acts a certain way for long enough, eventually it becomes us.

As a retrospective study, participants were able to reflect on the changes in themselves and their 'evolution' throughout the years (Lowthert, 2016). It was evident that all participants possessed an enhanced self-awareness; understanding, who and *why* they were was of comfort and afforded an acceptance.

Concluding comments

This research is significant and shows, unequivocally, that for participants, early 'motherloss' left an indelible mark, resulting in enduring non-finite loss and changes in self. Furthermore, these findings indicate that the experience of loss substantially affected the women's approach to motherhood.

Chapter 6:

Conclusion

Despite the number of years passed, participants' memories were clear; one life event so powerful that it overshadowed each life story. Their experiences left them hurt and hurting time and again by not only the loss of their mothers but also by the context of loss and mediating factors; both suppressive silence and lack of support made their mark. Furthermore, participants spoke with striking accord of the non-finite grief and sadness for both themselves and their mothers. An enduring sense of uncertainty always present; questioning, 'who would I have been?' 'How would life have been?' They, and the course of their lives were altered by the experience of mother death; their identity inextricably woven with the loss. Reshaped. Changed. In effect, hurt was threefold: mother death and loss of the pivotal relationship; exacerbation of grief by mediating factors, which were formative and enduring; and the non-finite loss and chronic sorrow brought in its wake. Indeed, it must be questioned whether it is *possible* to mourn in adolescence. Traditional 'expectations' must be thrown aside and the concept of 'adolescent grief' accepted; continuous, 'oscillating' and reverberating throughout life. Certainly, there is no resolution to grief for the bereaved daughter, rather, adaptation.

For participants, with age and motherhood, the enormity of loss and its reverberations become more apparent; pervasive in its effects to future generations. However, many positives emerged: a sense of healing, enhanced self-understanding and a feeling of closeness and continuing connection with their mothers which brought clarity and comfort.

For me, my mother is often in my thoughts and the hurt remains; grief still occasionally takes me by surprise, surfacing more than 30 years since her death. I am aware of the residual effects of profound loss; how her death has affected not only my character and the type of parent I am, but I am ever mindful of how my death could affect my own children. I too feel a comforting sense of connection with my mother, and certainly, understanding and self-

awareness of how her death has affected my life and my *self* has brought calm and peace. Understanding this phenomenon, and the commonality of response, validates the magnitude of this very particular loss.

This research has been both challenging and moving; the data collection and exhaustive process of analysis brought reminders of long 'forgotten' memories. However, noticing differences and the distinct similarities between cases brought an affirmation and certainty of the phenomenon of enduring effect of mother death in adolescence.

This study continues the conversation regarding impact of early parental death, albeit shaped by my position as researcher (McLeod, 2015), adding to a broader understanding of the enduring effect of mother death in adolescence. With an interpretivist approach and by nature of the data collection, it is believed that the study findings truly reflect the rich ambiguity of participants' nuanced experience, addressing the topic of enduring effect of mother death in adolescence, more specifically, for mothers (Larkin et al. 2006; Hanley, Lennie, West, 2013). While not an 'objective truth', this research challenges assumptions and is emotionally powerful, reiterating the enormity of mother death during the formative years and its 'ripple effect'; it is convincing in its findings.

Based on this study, there would be value in continuing with further research into and around this topic. As indicated by the 'gaps' in the reviewed literature, it would be helpful to further investigate specific areas of parental bereavement. This research could be developed by exploring experiences of motherless sons and motherless daughters; a comparative study regarding enduring effect. It would be interesting to examine enduring impact for sons bereaved of their fathers in adolescence. Lastly, as this study indicated some 'generational impact', research regarding the 'children of motherless daughters' and the effect (on them) of parenting from a motherless daughter, would be both fascinating and useful.

It is hoped that this research can support women bereaved of their mothers in adolescence and enable their self-understanding, validating their loss. It may also have significant

implications for counselling practice: by informing counsellors' understanding of this complex phenomenon. Silence and suppression may mean that the wounds of grief persist into adulthood, sometimes unbeknown even to the client. To be mindful of the chronic sadness that often accompanies ambiguous, disenfranchised, non-finite loss, may contribute to empathy and counsellors' perception of the internal frame of reference of their client, furthering the therapeutic alliance (Rogers, 1980).

References

- Abrams, R. (2013). *When parents die. Learning to live with the loss of a parent* (3rd edition). London, United Kingdom: Routledge.
- Anda, R. F., Felitti, V. J., Bremner, J. D., Walker, J. D., Whitfield, C., Perry, B. D., Dube, S. R. & Giles, W. H. (2006). The enduring effects of abuse and related adverse experiences in childhood: A convergence of evidence from neurobiology and epidemiology. *European Archives of Psychiatry and Clinical Neuroscience*, 256, 174–186.
- Anderson, M. Goodman, J. & Schlossberg, N. (2012). *Counselling Adults in Transition. Linking Schlossberg's theory to practice in a diverse world* (4th ed.). New York, NY: Springer.
- Apelian, E. & Nesteruk, O. (2017). Reflections of young adults on the loss of a parent in adolescence. *International Journal of Child, Youth and Family Studies*, 8(3-4), 79-100.
- Archer A. (2019 July 11th). Twitter post. Retrieved from <http://twitter.com/@ABlackWholeSun>
- Arnett, J. (2007). Emerging adulthood: what is it and what is it good for? *Child Development Perspectives*, 1(2), 68-73.
- Attig, T. (2011). *How we grieve. Relearning the world*. (2nd edition). New York, NY: Oxford University Press.
- Auman, MJ. (2007). Bereavement support for children. *Journal of School Nursing* 23, 34–9.
- Balk, D. (2000). Adolescents, grief and loss. In K. Doka (Ed.) *Living with grief. Children, adolescents and loss* (pp. 35-51). New York, NY: Routledge.

- Barbour, R. S. (2013). *Introducing Qualitative Research: A Student's Guide to the Craft of Qualitative Research* (2nd ed.). London, United Kingdom: Sage.
- Biank, M. N. & Werner-Lin, A. (2011). Growing up with grief: Revisiting the death of a parent over the life course. *Omega: Journal of Death and Dying*, 63(3), 271-290.
- Blake, B. (2000). How I coped with loss. In K. Doka (Ed.) *Living with grief. Children, adolescents and loss* (pp. 123-125). New York, NY. Routledge.
- Bond, T. (2015). Ethical considerations. In A. Vossler, N. Moller (Eds.) *The counselling and psychotherapy research handbook* (pp. 101-116). London, United Kingdom: Sage.
- Bowlby, J (1969). *Attachment and Loss; Attachment. Vol. 1* New York, NY: Basic Books.
- Bowlby, J. (1980). *Loss, sadness, and depression*. New York, NY: Basic Books.
- Boyd, D. & Bee, H., (2015). *Lifespan development* (7th edition). Boston, MA: Pearson.
- Brenner, H. G. (2018). How Does Early Parental Death Affect Adult Relationships? *Psychology Today*, Retrieved 15.2.19 from <https://www.psychologytoday.com/us/blog/experimentations/201802/how-does-early-parental-death-affect-adult-relationships>
- British Association for Counselling and Psychotherapy (2019). Ethical guidelines for research in the counselling professions. Retrieved from <https://www.bacp.co.uk/events-and-resources/research/publications/ethical-guidelines-for-research-in-the-counselling-professions/>
- Bylund-Grenklo, T., Furst, C., Nyberg, T., Steineck G. & Kreicbergs, U. (2016). Unresolved grief and its consequences. A nationwide follow-up of teenage loss of a parent to cancer 6-9 years earlier. *Supportive Care in Cancer*, 24, 3095.
doi.org/10.1007/s00520-016-3118-1
-

- Calhoun, L. & Tedeschi, R. (2000). Posttraumatic Growth: The Positive Lessons of Loss. In R. Neimeyer (Ed). *Meaning Reconstruction and the Experience of Loss* (III; 8). Washington D.C.: American Psychological Association.
- Chenail, R. J. (2011). Interviewing the investigator: strategies for addressing instrumentation and researcher bias concerns. *The qualitative report*, 16(1), 255-262.
- Chodorow, N. (1978). *The reproduction of mothering: Psychoanalysis and the sociology of gender*. Berkeley, CA: University of California Press.
- Christ, G. H. (2010). Children bereaved by the death of a parent. In: D. Balk & C. Corr, (eds.). *Children's Encounters with Death, Bereavement, and Coping* (pp. 169-190). New York, NY: Springer Publishing Company.
- Clark-Coates, Z. (2019 August 13). The mariposa trust; death of a loved one; quotes, poems and resources. Retrieved from <https://en-gb.facebook.com/MariposaTrust/posts/1280921691965609>
- Corr, C. (2000). What do we know about grieving children and adolescents? In K. Doka (Ed.) *Living with grief. Children, adolescents and loss* (pp. 21-33). New York, NY: Routledge.
- Dallos, R. & Vetere, A. (2005). *Researching Psychotherapy and Counselling*. Maidenhead, United Kingdom: Open University Press.
- Dawson, C. (2009). *Introduction to research methods: A practical guide for anyone undertaking a research project* (4th edition). Oxford, United Kingdom: How to Books.
- Dehlin, L. & Martensson, I. L. (2009). Adolescents' experiences of a parent's serious illness and death. *Palliative and Supportive Care*, 7(1), 13-25.
- Denscombe, M. (2010). *The good research guide for small scale research projects*. Maidenhead, United Kingdom: Oxford University Press.
-

- Denes-Raj, V. & Ehrlichman, H. (1991). Effects of premature parental death on subjective life expectancy, death anxiety and health behaviour. *Omega* 23, 309-321.
- Desai, S. & Bevan, D. (2002). Race and Culture. In: D. Thompson (Ed.), *Loss and Grief: A Guide to Human Services Practitioners* (pp. 65-79). Basingstoke, United Kingdom: Palgrave.
- Dowdney, L. (2011). Children Bereaved by Parent or Sibling Death. In D. Skuse, H. Bruce, L. Dowdney & D. Mrazek (Eds.), *Child Psychology and Psychiatry: Frameworks for Practice* (2nd edition) (pp. 92-99). Hoboken, NJ: Wiley & Sons.
- Edelman, H. (2006). *Motherless mothers*. New York, NY: Harper Collins.
- Edelman, H. (2014). *Motherless daughters* (20th anniversary edition). Philadelphia, PA: Da Capo Press.
- Elliot, J. & Shepherd, P. (2006). 'Cohort profile: 1970 British birth cohort (BCS70)'. Oxford University Press, *International Epidemiological Association*, 35, 836-43.
- Elliot, M. & Williams, D. (2001). Paradoxes of qualitative research. *Counselling & Psychotherapy Research Journal*, 1(3), 181-183.
- Ellis, J. & Lloyd-Williams, M. (2008). Perspectives on the impact of early parent loss in adulthood in the UK: narratives provide the way forward. *European Journal of Cancer Care*, 17(4) 317-318.
- Ellis, J., Dowrick, C. & Lloyd-Williams, M. (2013). The long-term impact of early parental death: lessons from a narrative study. *Journal of the Royal Society of Medicine*, 106(2), 57-67.
- Erikson, E. (1980). *Identity and the Life Cycle*. New York, NY: Norton.

- Evans, G. W., Gonnella, C., Marcynszyn, L. A., Gentile, L. & Salpekar, N. (2005). The role of chaos in poverty and children's socioemotional adjustment. *Psychological Science*, 16, 460–565.
- Feigelman, W., Rosen, Z., Joiner, T., Silva, C. & Mueller, A. S. (2017). Examining longer-term effects of parental death in adolescents and young adults: Evidence from the national longitudinal survey of adolescent to adult health. *Death Studies* 41(3), 133-143.
- Fingerman, K. L. (2001). *Aging mothers and their adult daughters: A study in mixed emotions*. New York, NY: Springer.
- Finkelstein H. (1988). The long-term effects of early parent death: A review. *Journal of Clinical Psychology*, 44(1), 3-9.
- Finlay, L. (2015). Qualitative methods. In A. Vossler, N. Moller, (Eds.), *The counselling and psychotherapy research handbook* (pp. 164-183). London. United Kingdom: Sage.
- Flick, U. (2015). *Introducing research methodology* (2nd edition). Los Angeles, CA: Sage.
- Fry, V. (2000). Part of me died too. Creative strategies for grieving children and adolescents. In K. Doka (Ed.), *Living with grief. Children, adolescents and loss* (pp. 125-139). New York, NY: Routledge.
- Gersten, J., Beals, J. & Kallgren, C. (1991). Epidemiology and preventive interventions: Parental death in childhood as a case example. *American Journal of Community Psychology*, 19, 481–499.
- Gorman, E. (2011). Adaptation, resilience, and growth after loss. In D. Harris (Ed.), *Counting our losses. Reflecting on change, loss and transition in everyday life* (pp. 225-239). New York, NY: Taylor & Francis.
-

Gilligan, C. (1982). *In a different voice. Psychological theory and women's development.*

Cambridge, MA: Harvard University Press.

Greene, N. & McGovern, K. (2017). Gratitude, psychological well-being, and perceptions of posttraumatic growth in adults who lost a parent in childhood. *Death Studies*, 41(7) 436-446.

Haine, R., Ayers, T., Sandler, I., Wolchik, S. & Weyer, J. (2003). Locus of control and self-esteem as stress-moderators or stress-mediators in parentally bereaved children. *Death Studies*, 27, 619–640.

Haine, R. A., Wolchik, S. A., Sandler, I. N., Millsap, R. E. & Ayers, T. S. (2006). Positive parenting as a protective resource for parentally bereaved children. *Death Studies*, 30, 1–28.

Hanley, T., Lennie, C. & West, W. (2013). *Introducing counselling and psychotherapy research.* London. United Kingdom: Sage.

Hanley, T., Jordan, C. & Wilk, K. (2015). Planning your research: design, method and sample. In A. Vossler, N. Moller (Eds.), *The counselling and psychotherapy research handbook* (pp. 88-101). London. United Kingdom: Sage.

Harris M. (1995). *The loss that is forever. The lifelong impact of the early death of a mother or father.* London. United Kingdom: Penguin Books.

Harris, D. (2011). Meaning making and the assumptive world in non-death loss. In D. Harris, (Ed.), *Counting our losses. Reflecting on change loss and transition in everyday life* (pp. 239-247). New York, NY: Routledge.

Harris, D. & Gorman, E., (2011). Grief from a broader perspective: Non-finite loss, ambiguous loss and chronic sorrow. In D. Harris (Ed.), *Counting our losses.*

Reflecting on change loss and transition in everyday life (pp. 1-15). New York, NY: Routledge.

Harvey, J. H., (2002). *Perspectives on loss and trauma. Assaults on the self*. London. United Kingdom: Sage.

Heinzer, M. V. (1993). *Adolescent resilience following parental death in childhood and its relationship to parental attachment and coping*. Available from Nursing & Allied Health Database. (304085161). Retrieved from:
<https://search.proquest.com/docview/304085161?accountid=14620>

Hennick, M., Hutter, I. & Bailey, A. (2011). Qualitative research methods. *Critical Public Health*, 22(1) 111-112.

Høeg, B. L., Johansen, C., Christensen, J., Frederiksen, K., Dalton, S. O., Dyregrov, A. & Bidstrup, P. E. (2018). Early parental loss and intimate relationships in adulthood: A nationwide study. *Developmental Psychology*, 54(5), 963–974.

Hollingshaus, M. & Smith, K., (2015). Life and death in the family: Early parental death, parental remarriage, and offspring suicide risk in adulthood. *Journal of Social Science and Medicine*, 131, 181-189.

Hope, R. & Hodge, D. (2006). Factors affecting children's adjustment to the death of a parent: The social work professional's viewpoint. *Child and Adolescent Social Work Journal*, 23, 107-126.

Howe, D. (2011). *Attachment across the Lifecourse. A Brief Introduction*. Hampshire. United Kingdom: Palgrave Macmillan.

Humphrey, G. & Zimpher, D, (2008). *Counselling for grief and bereavement*. (2nd edition). London. United Kingdom: Sage.

Jordan, N. (2017). In morte sumus. *Therapy Today*. 28(7), 35-37.

James, A. (2003). *Living with bereavement*. Berkshire. United Kingdom: Right Way.

Josselson (1987). *Finding herself: pathways to identity development in women*. San Francisco, CA: Jossey-Bass.

Kauffman, J. (2011). The trauma of neglect: loss of self. In D. Harris, (Ed.), *Counting our losses. Reflecting on change loss and transition in everyday life* (pp. 143-151). New York, NY: Routledge

Keenan, A. (2014). Parental loss in early adolescence and its subsequent impact on adolescent development. *Journal of Child Psychotherapy*, 40(1), 20-35.

Koblenz, J. (2015). Growing from grief: Qualitative experiences of parental loss. *Omega: Journal of Death and Dying*, 73(3), 203-230. DOI: 10.1177/0030222815576123

Kopsa, A. (2019, 2nd February). Rites of passage. There are no 5 stages of grief. New York Times. Retrieved from <http://www.nytimes.com>

Kroger, J. (1989). *Identity in Adolescence. The balance between self and other*. London. United Kingdom: Routledge.

LaFreniere, L. & Cain, A. (2015). Parentally bereaved children and adults: The question of peer support. *Omega: Journal of Death and Dying*, 71(3), 245-271. DOI: 10.1177/0030222815575503

Larkin, M., Watts, S. & Clifton, E. (2006). Giving voice and making sense in interpretive phenomenological analysis. *Qualitative Research in Psychology*, 3(4), 102-130.

Larson, D. (2013). A person centred approach to grief counselling In M. Cooper, M. Ohara, P. Schmid & A. Bohart (Eds.), *The handbook of person-centred counselling and psychotherapy* (pp.313-326). (2nd edition). London. United Kingdom: Palgrave Macmillan.

- Leopold, T. & Lechner, C. M. (2015). Parents' death and adult well-being: Gender, age, and adaptation to filial bereavement. *Journal of Marriage and the Family*, 77(3), 747-760.
- Lendrum, S. & Syme, G. (2004). *Gift of tears. A practical approach to loss and bereavement in counselling and psychotherapy*. (2nd edition). New York, NY: Brunner-Routledge.
- Lincoln, Y. S. & Guba, E. G. (1985). *Naturalistic enquiry*. London. United Kingdom: Sage
- Lowthert, J. R. (2016). *Life still goes on. The blog book of a motherless daughter*. NJ: Jenna Rose Lowthert.
- Luecken L. J., Appelhans, B. M., Kraft, A. & Brown, A. (2006). Never far from home: A cognitive-affective model of the impact of early-life family relationships on physiological stress responses in adulthood. *Journal of Social and Personal Relationships*, 23(2), 189–203.
- Luecken L. J. (2008). Long-term consequences of parental death in childhood: Physiological and psychological manifestations. In M. Stroebe, R. O. Hansson, H. Schut, W. Stroebe (Eds.), *Handbook of Bereavement Research and Practice: advances in theory and intervention* (pp. 397-416). Washington, DC: American Psychological Association Press.
- Luecken, L. J. & Roubinov, D. S. (2012). Pathways to lifespan health following childhood parental death. *Social and Personality Psychology Compass*, 6(3), 243-257.
- Luxmoore, N. (2012). *Young people, death and the unfairness of everything*. London. United Kingdom: Jessica Kingsley.
- Machin, L. (2014). *Working with loss and grief. A theoretical and practical approach*. (2nd edition). London. United Kingdom: Sage.

- Mack, K. Y. (2004). The Effects of Early Parental Death on Sibling Relationships in Later Life. *Omega Journal of Death and Dying*, 49(2), 131-148. Retrieved from <https://sites.ualberta.ca/~jenny/pdfs/14022502.pdf>
- Maier, E. H. & Lachman, M. E. (2000). Consequences of early parental loss and separation for health and well-being in midlife. *International Journal of Behavioural Development*, 24(2), 183-189. Retrieved from <http://journals.sagepub.com/doi/abs/10.1080/016502500383304>
- Mannarino, A. & Cohen, J. (2011). Traumatic Loss in Children and Adolescents. *Journal of Child & Adolescent Trauma*, 4(1) 22-33.
- Marks, N. F., Jun, H. & Song, J. (2007). Death of parents and adult psychological and physical well-being. A prospective U. S. national study. *Journal of Family Issues*, 28(12), 1611-1638. Retrieved from <https://ncbi.nlm.nih.gov/pmc/articles/pmc2638056>
- Maykut, P. & Moorehouse, R. (1994). *Beginning qualitative research: a philosophic and practical guide*. London. United Kingdom: Falmer Press.
- Merry, T. (2002). *Learning and being in person-centre counselling* (2nd edition). Monmouth. United Kingdom: PCCS Books.
- Meshot, C. M. & Leitner, L. M. (1993). Adolescent mourning and parental death. *Omega Journal of Death and Dying*, 26, 493-506.
- McLeod, J. (2011). *Qualitative research in counselling and psychotherapy* (2nd edition). London. United Kingdom: Sage.
- McLeod, J. (2015). *Doing research in counselling and psychotherapy* (3rd edition). London. United Kingdom: Sage.
- Miller, A. (2019). Psychological Effects of Parental Death. *Livestrong*. Retrieved from <https://www.livestrong.com/article/1002153-psychological-effects-parental-death/>
-

- Mintz, R. (2010). Introduction to conducting qualitative research (R14). British Association for Counselling and Psychotherapy.
- Mireault, G., Thomas, T. & Bearor, K. (2002). Maternal identity among motherless mothers and psychological symptoms in their first born children. *Journal of Child and Family Studies*, 287-297.
- Moor, N. & de Graaf, P. M. (2016). Temporary and long-term consequences of bereavement on happiness. *Journal of Happiness Studies*, 17(3), 913-936.
- Neeleman, J., Sytema, S. & Wadsworth, M. (2002). Propensity to psychiatric and somatic ill-health: evidence from a birth cohort. *Psychological Medicine*, 32, 793–803.
- Neimeyer, B. (2019). Making meaning out of loss. *Therapy Today*, 30(7), 26-29.
- Parkes, C.M. (2012). *Bereavement; Studies of Grief in Adult Life* (4th ed.). London. United Kingdom: Routledge.
- Parsons, S. (2011). Long-term Impact of Childhood Bereavement: Preliminary Analysis of the 1970 British Cohort Study (BCS70). London: Childhood Wellbeing Research Centre.
- Pearce, C. (2011). Girl, interrupted: An exploration into the experience of grief following the death of a mother in young women's narratives, *Mortality*, 16(1), 35-53.
- Pill, C. J. & Zabin, J. L. (1997). Lifelong legacy of early maternal loss: a women's group. *Clinical Social Work Journal*, 25, (2) 179–195.
- Rando, T. (1993). *Treatment of complicated mourning*. Champaign, IL: Research Press.
- Ribbens McCarthy, J. Dr. (2007). 'They all look as if they're coping, but I'm not': the relational powerlessness of 'Youth' in responding to experiences of bereavement. *Journal of Youth Studies*, 10(3), 285–303.
-

- Riches, G. & Dawson, P. (2000). *An Intimate Loneliness*. Buckingham. United Kingdom: Open University Press.
- Rogers, C. (1980). *A way of being*. New York, NY: Houghton Mifflin Harcourt.
- Rossi, A. (1984). Gender and parenthood. *American Sociological Review*, 49, 1–18.
- Rossi, A. S. & Rossi, P. H. (1990). *Of human bonding: Parent-child relations across the life course*. New York, NY: Aldine de Gruyter.
- Rostila, M. & Saarela, J. M. (2011). Time does not heal all wounds: Mortality following the death of a parent. *Journal of Marriage and Family*, 73(1), 236-249.
DOI: <http://dx.doi.org/10.1111/j.1741-3737.2010.00801.x>
- Rostila, M., (2015). Childhood parental loss and adulthood health: Discussing the role of parental cause of death, child's age at death and historical context. *Social Science and Medicine*, 131, 190-192.
- Rowe, B. & Harman, B. (2014). Motherless mothers: maternally bereaved women in their everyday roles as mothers. *Journal of Family studies*, 20(1), 28-38. Retrieved from <http://ro.ecu.edu.au/cgi/viewcontent.cgi?article=1353&context=ecuworkspost2013>
- Rye, G. (2004). Motherless daughters: The legacy of loss. *Journal of the motherhood initiative for research and community involvement* 6(2). Retrieved from <https://jarm.journals.yorku.ca/index.php/jarm/article/view/4937/0>
- Samuel, J., (2017). *Grief Works: Stories of Life, Death and Surviving*. London. United Kingdom: Penguin Life.
- Sanders, P. & Wilkins, P. (2010). *First steps in practitioner research. A guide to understanding and doing research in counselling and health and social care*. England. United Kingdom: PCCS Books.
-

- Sandler, I. N. (2001). Quality and ecology of adversity as common mechanisms of risk and resilience. *American Journal of Community Psychology*, 29, 19–61.
- Schultz, L. (2007). The influence of maternal loss on young women's experience of identity development in emerging adulthood. *Death Studies*, 31, 17–43.
- Schwartz, L., Howell, K. & Jamison, L. (2018). Effect of time since loss on grief, resilience, and depression among bereaved emerging adults. *Death Studies*, 42(9), 537-547.
- Servaty, H. & Hayslip, B. (2001). Adjustment to loss among adolescents. *Omega* 43, 313-314.
- Shaffer, D. & Kipp, K. (2014). *Developmental Psychology. Childhood and Adolescence*. (9th edition). Wadsworth. United Kingdom: Cengage Learning.
- Siegel, D. & Hartzell, M. (2104). *Parenting from the inside out. How a deeper understanding can help you raise children who thrive*. Tenth anniversary edition. London. United Kingdom: Scribe.
- Silverman, P. (2000). *Never too young to know. Death in children's lives*. New York, NY: Oxford University Press.
- Silverman, P. (2000). When parents die. In K. Doka (Ed.), *Living with grief. Children, adolescents and loss* (pp. 215-229). New York, NY: Routledge.
- Silverman, P. R. & Klass, D. (1996). Introduction: what's the problem? In D. Klass, P. R. Silverman, S. L. Nickman (Eds.), *Continuing bonds: new understandings of grief*. Washington DC: Taylor & Francis.
- Silverman, P. & Worden, W. (1993). Grief and depression in newly widowed parents with school age children. *Omega* 27, 252-258.
- Smith, J. A., Flowers, P. & Larkin, M. (2009). *Interpretive phenomenological analysis: theory, methods and research*. London. United Kingdom: Sage.
-

- Smith, J., Jarman, M. & Osborn, M. (1999). Doing interpretative phenomenological analysis. In M. Murray, K. Chamberlain (Eds.), *Qualitative health psychology. Theories and methods* (pp. 218-240). London. United Kingdom: Sage.
- Smith, K., Hanson, H., Norton, M., Hollingshaus, M. & Mineau, G. (2014). Survival of offspring who experience early parental death: Early life conditions and later-life mortality. *Social Sciences & Medicine*, 119(10), 180-190.
- Spinelli, E. (2005). *The Interpreted world: An introduction to phenomenological psychology* (2nd edition). London. United Kingdom: Sage.
- Sroufe, L. A. (2005). Attachment and development: A prospective, longitudinal study from birth to adulthood. *Attachment and Human Development*, 7, 349–367.
- Stikkelbroek, Y., Prinzie, P., de Graaf, R., Have, M. & Cuijpers, P. (2012). Parental death in childhood and psychopathology in adulthood. *Psychiatry Research*, 198(3), 516-520.
- Stroebe, M. S. & Schut, H. A.W. (1999). The dual process model of coping with bereavement: rationale and description. *Death Studies*, 23, 197–224.
- Stroebe, M. & Schut, H., (2010). The dual process model of coping with bereavement: a decade on. *Omega*, 61(4), 273-289.
- Sugarman, L. (2001). *Life Span Development* (2nd edition) New York, NY: Meuthen.
- Sveen, J., Kreicbergs, U., Melcher, U. & Alvariza, A. (2016). Teenagers' reasoning about a parent's recent death in cancer. *Palliative & Supportive Care*, 14(4), 349-357. DOI: <http://dx.doi.org/10.1017/S1478951515001054>
- Thompson, N. (2012). *Grief and its challenges*. Hampshire. United Kingdom: Palgrave Macmillan.

- Timulak, L. (2015). Introducing research methodology. In A. Vossler, N. Moller, (Eds.) *The counselling and psychotherapy research handbook* (pp. 74-88). London. United Kingdom: Sage.
- Tracey, A. D Phil, (2011). Perpetual loss and pervasive grief. *Bereavement Care*, 30(3) 17-24, DOI: [10.1080/02682621.2011.617966](https://doi.org/10.1080/02682621.2011.617966)
- University of Chester Research Governance Handbook (2018) Retrieved from <http://chester.ac.uk/sites/files/chester/2016-Research-Governance-Handbook-2.9.pdf>
[Volume 131](#), (pp. 181-189).
- Valle, G. & Tillman, K. H. (2014). Childhood family structure and romantic relationships during the transition to adulthood. *Journal of Family Issues*, 35(1), 97-124.
- Waters, E., Merrick, S., Treboux, D., Crowell, J. & Albersheim, L. (2000). Attachment security in infancy and early adulthood: A twenty-year longitudinal study. *Child Development*, 71, 684–689.
- Walsh, K. (2012). *Grief and loss. Theories and Skills for the helping professions*. (2nd edition), NJ: Pearson Education.
- Wainrib, B. R. (2006). *Healing crisis and trauma with mind body and spirit*. New York, NY: Springer.
- Willig, C. (2001). *Introducing qualitative research in psychology: adventures in theory*. Buckingham. United Kingdom: Open University Press.
- Willig, C. (2013). *Introducing qualitative research in psychology*. Buckingham. United Kingdom: Open University Press.
- Winston's Wish. Giving hope to grieving children. Retrieved from Winston's Wish website: <https://www.winstonswish.org/adults-bereaved-as-children/>
-

Worden, W. (1996). *Children and grief: When a parent dies*. New York, NY: Guilford Press

Worden, W. (2009). *Grief counselling and grief therapy. A handbook for the mental health practitioner*. (4th edition). New York, NY: Springer Publishing.


Worden, W. (2010). *Grief Counselling and Grief Therapy* (4th ed). London. United Kingdom: Routledge.


Yardley, L. (2000). Dilemmas in qualitative health research. *Psychology & Health*, 15, 215-228.

Zall, D. (1994). The long term effects of childhood bereavement: impact on roles as mothers. *Omega* 29, 219-230.

Appendices

Appendix 1: Advert for participants



 University of
Chester

I am a final year MA Clinical Counselling student at
Chester university

Looking for volunteer study participants!

Are you a mum, aged over 40 whose mother died
during your adolescence (13-18 years)?

Would you be willing to talk about how your
experience has affected your life and the parent you
have become in a 1 hour interview?

Please contact Rachael Hardman:
1622245@chester.ac.uk



Appendix 2: Information Sheet

Participant Information Sheet

The death of a mother in adolescence; a qualitative study of the perceived impact on a woman's adult life and the parent she becomes

Dear

Thank you for indicating that you are interested in taking part in this research. This Information Sheet will hopefully explain what is involved, but if you need further clarification, then please do not hesitate to contact me using the contact details below.

What is the purpose of the study?

This research is part of a MA in Clinical Counselling degree that I am undertaking at the University of Chester. I am interested in finding out ***about your perception of how the death of your mother during adolescence may have effected/impacted you as an adult woman***. I would be interested in exploring your view on, and experience of, this.

What criteria do I need to meet?

In order to be included in this study, you must meet certain criteria and be able to answer 'yes' to the following:

- I am female
- I am 40 years of age or over
- My mother died whilst I was an adolescent, (I was between 13-18 years)
- I feel sufficiently grounded in my experience of this loss to discuss related issues in-depth
- I am not currently undergoing bereavement counselling
- I am a mother
- I can speak and read English

What will happen to me if I take part?

To enable this, if you decide to take part, I will arrange a time to interview you face-to-face at your convenience. Your written consent will be obtained through the enclosed consent form (which you can post or scan and email to me). The interview will be digitally recorded and last approximately an hour.

The interview will be semi-structured and be focussed around the following questions:

- Can you tell me about your experience of losing your mum when you were ___?
- How do you feel losing your mother during your adolescence has affected your approach to life and who you have become?
- How do you feel not having your mum around all these years has affected you?
- What areas of life has it effected most?
- Could you tell me how it has affected your relationships?
- In what ways, if any, do you feel losing your mother, and her lack of presence, has affected you as a mother?
- What has helped you the most?
- Do you think anything positive has come from your experiences?

Once the interview is complete, the digital recording will be transcribed. Your transcript will be allocated a pseudonym to protect your anonymity, and any identifying features in the data will be deleted. The transcript will be emailed to you to check for accuracy and to give you an opportunity to amend or change any of the data. Your final written consent will be obtained, allowing me to begin the process of analysis of the data.

Your right to withdraw without prejudice

You have every right to withdraw from the research at any time, without prejudice, up until the point that the thesis has begun to be written up. I will let you know when that is. Once the writing-up has begun, it will be impossible to remove your data as it will be aggregated, making your data more difficult to identify.

What are the possible disadvantages and risks of taking part?

If, for any reason, personal issues are stirred for you, I will do my best to support you in the time we are together. I am also able to furnish you with a list of counselling organizations in your locality whom you may be able to access, although this will be at your expense.

What are the possible benefits of taking part?

The experience will give you time to reflect and to share your thoughts. This may contribute to something greater at research and policy level.

What if something goes wrong?

I will do everything within my ability to ensure your safety and confidentiality. However, if you are not happy with any aspect of the research process, please raise it with me. If you are still not happy, you may raise it with my Research Supervisor, Rita Mintz, at the University of Chester; rmintz@chester.ac.uk

If you are still unhappy with things, you may then raise it with the Dean of Faculty, Professor David Balsamo: Email: d.balsamo@chester.ac.uk

In the unlikely event that a participant is harmed by taking part in the research, there are no special compensation arrangements.

Will my taking part in the study be kept confidential, and how will my data be stored?

The fact that you are taking part in the research, and everything that you share, will remain confidential. In the unlikely event that Child Protection issues are raised, I may have to alert Social Services or Police, but otherwise, what you share will form part of the data which will be anonymised by use of a pseudonym. The data will be stored securely in locked premises and kept encrypted on a password protected computer. Only I, and my Research Supervisor, will have access to the data. The data will be destroyed (shredded or electronically deleted) after five years, in keeping with the data protection act.

What will happen to the results of the research study?

The completed research will be stored (bound and electronic) at the University of Chester. The research may be disseminated in future publications and at conferences.

Whom may I contact for further information?

I, the researcher: Rachael Hardman
My contact details are: 1622245@chester.ac.uk; 07761756551

If you have been adversely affected by reading this information sheet you can call; Cruse Bereavement Care on 0808 808 1677.

Thank you for your interest in this research.



Appendix 3: Inclusion Criteria

Inclusion Criteria

Thank you for agreeing to participate in this study.

In order to be included in this research, there are certain criteria that you must 'fit'.

Please see below and tick the appropriate boxes to indicate your suitability:

- I am female ☐
- I am 40 years of age or over ☐
- My mother died whilst I was an adolescent, (I was between 13-18 years) ☐
- I feel sufficiently grounded in my experience of this loss to talk about related issues in-depth ☐
- I am not currently having bereavement counselling ☐
- I am a mother ☐
- I can speak and read English ☐

Name of participant:



Appendix 4: Consent Form

Consent Form

The death of a mother in adolescence; a qualitative study of the perceived impact on a woman's adult life and the parent she becomes.

Name of Researcher: **Rachael Hardman**

Please initial box

- | | |
|--|--------------------------|
| 1. I have read and understood the participant information sheet and have had the chance to ask questions. | <input type="checkbox"/> |
| 2. I agree to the research conversation being audio recorded. | <input type="checkbox"/> |
| 3. I understand that my participation is voluntary and that I am free to withdraw at any time before the dissertation has begun to be written-up, without giving any reason. | <input type="checkbox"/> |
| 4. I agree to take part in this study. | <input type="checkbox"/> |
| 5. I understand that the data will be written up as part of a dissertation and I will not be identifiable in the dissertation. | <input type="checkbox"/> |

Name of Participant

Date

Signature

Researcher

Date

Signature



Appendix 5: Interview Questions

The interview will be semi-structured and be focussed around the following questions:

- Can you tell me about your experience of losing your mum when you were ___?
- How do you feel losing your mother during your adolescence has affected your approach to life and who you have become?
- How do you feel not having your mum around all these years has affected you?
- What areas of life has it effected most?
- Could you tell me how it has affected your relationships?
- In what ways, if any, do you feel losing your mother, and her lack of presence, has affected you as a mother?
- What has helped you the most?
- Do you think anything positive has come from your experiences?

Appendix 6: Examples of first level of analysis for all participants

Anne:

Emerging themes	Transcript	Initial notes
<p>Silence</p> <p>Anger</p> <p>grief</p> <p>father's inability to cope</p> <p>loss of father</p> <p>silence</p> <p>explicit grief/coping mechanism (self-harm)</p> <p>disregarded/overlooked</p> <p>Aloneness/loss of connection/love?</p> <p>Resilience; strength</p>	<p>I remember shouting at him once and saying, "You don't talk to me anymore," and he just blew up in my face and he said, "I'm losing my job," because he was made redundant very shortly afterwards, "I'm losing my job, they're going to get rid of me, is that what you wanted to hear, is that what you wanted to know?" So that was the extent of that (laughter), that was his reaction was to not cope, to not cope at all, he threw himself into work and then it was X redundancies at the time in the '80's and he lost his job so he threw himself into that and those relationships at work, he just never spoke to me. So, age around X, I started self-harming, not terribly, mostly burns, I used to burn, do friction burns and I took myself to the doctor and said, "I'm not coping," and the doctor put me on antidepressants and sent me off so there was no counselling or anything.</p> <p>I: And that was ... -?</p> <p>R: Around ... X I think; again, that's in the memory gap so I'm kind of, I have to work backwards. I don't remember going, I don't remember the conversation, I just know I was on them and - I know I went by myself and I absolutely know I went by myself. My dad had no involvement in that at all</p>	<p>Even then she knew she needed communication</p> <p>"you don't talk to me anymore"</p> <p>Anger.</p> <p>Grief</p> <p>Father's inability to cope</p> <p>"never spoke to me"</p> <p>Self-harm-coping mechanism</p> <p>DAMAGE</p> <p>Not heard</p> <p>"I went by myself"</p> <p>Alone</p> <p>"doc didn't pay any attention...had nobody at school"</p> <p>Strength(forced)</p> <p>"there was no support there"</p> <p>Alone</p> <p>Overlooked</p>

Kate:

Emerging themes	Transcript	Initial notes
<p>Silence, gagged, suppressed</p> <p>Clear message given</p> <p>Sense of insignificance/worthlessness</p>	<p>Yes, seven or eight years later, but I couldn't talk about it in front of her because she didn't want to talk about things like that, so it was, yes, silence again.</p> <p>I: ...it just feels like everything was shut down.</p> <p>R: Yes, it was. So in that sense it's made me always feel slightly incomplete and what I wrote the other night was, broken and incomplete ever since, I felt isolated and alone, and because we'd moved to X, I felt I didn't have anybody really close that I could talk to, but it made me incredibly strong, you know? It does, these things make you very strong, I think because you've been so much pain, and again it's a very personal sort of pain, it's not the sort of pain you can describe, if you've been through pain like that, pain...nothing, you know? You can cope with it.</p>	<p>Silenced by father's wife Not heard, not seen. Unimportant??</p> <p>"didn't have anyone close I could talk to"</p> <p>broken</p> <p>Incomplete</p> <p>Unspoken</p> <p>Unanswered</p> <p>Isolated</p> <p>Alone</p> <p>Strong (forced) Resilience?</p>
<p>Aloneness; lost; adrift</p> <p>Loss of part of self; sense of incompleteness; broken</p> <p>Sense of aloneness, isolation</p> <p>Forced strength</p>	<p>I: It's almost when you've been through the worst pain imaginable, nothing can really hurt you again.</p>	<p>Because of indescribable pain</p>
<p>Indescribable pain;</p> <p>Sense of being untouchable/impenetrable</p> <p>Taught resilience</p> <p>Violent imaginings</p>	<p>R: Yes, and I think because it was such a violent death, she'd died of head injuries, you know, can you imagine that? How awful.</p>	<p>Enormous emotional pain</p>

Helen:

Emerging themes	Transcript	Initial notes
Needs certainty (insecurity)	I just fret needlessly.	Creates secure environment
Control(brings sense of security)	I: Anxious over having everything in place, control over everything.	**Does control bring a sense of security??
Uncertainty anxiety	R: I don't know why I do it. There is a huge element of anxiety that this could happen to me. The same thing could happen. I'm paranoid about a little thing on my leg at the moment. I'm paranoid is that cancer. I go to the doctors so often. I've got mole here and I've got this there. Yet, I think it's exacerbated by the fact I've got a child ... and might be dependent all of his life, and I might disappear. What the hell will happen to him.	Worry without need
Anxiety (health)		Questions self
Death anxiety		Anxiety over it happening again
Anxiety for kids		Health anxiety
		Exacerbated by having a dependent child
	I: It's almost like double whammy of anxiety.	I might disappear (as mother disappeared)
Loss of self, loss of innocence	R: Yeah... so who is going to look after him. I feel a bit jealous of people who don't think of those sort of thoughts. That they have got that naivety that you'll go on forever. I've always thought what if I die when they were little. You just want to be in total control. You just want to be ... they'll say nothing like that can ever happen again. You can never be so unprepared for something.	Jealous of people who don't worry
Preparation & protection		Naivety "that you'll go on forever"
Insecurity		Lost innocence
Ontological insecurity		Preparing for the worst; ontological insecurity

Heidi:

Emerging themes	Transcript	Initial notes
Distance Aloneness End of childhood Parentification Assumed mother's role Trauma Pain anguish Disenfranchised Disregarded Unasked questions; silence Fear of further loss Increased self-awareness Reflective perception Loss of extended family unit Fractured. Broken	<p>The years that were the most difficult would have to be from the moment of her death when I was X, marriage when I was X, but those teenage years, ... I don't know. My dad married again when I was X, but those years were not good years and in those years nobody within the family came around to do practical things like clean the house or make the dinner. We'd come home from school and make a meal. By the time my (sibling) was X and I was X, we were basically bringing ourselves up, which is horrendous. These people within the family that I've always been very fond of and still am and wish were still alive, none of them were ever confronted with you do know how difficult it was for us those years, don't you? In other words, why did my grandmother never come around? Why did this? Why did that? I never confronted them because I probably felt an insecurity.</p> <p>It's very, very complicated because what happens is when a person dies ... okay, my mother died, but I know I've read about it since. My mother died and the only link then was my father, but my father wasn't family. This is very hard to explain. How do I put it? The link with my mother's family was my mother and she'd gone, and they were very a very clannish family, blood was thicker than water. My dad then became slightly on the outside.</p>	<p>Insecure "not good" minimised Trying to explain thoughts; has 'read up on it' knowledge brings self-understanding "nobody" Mother is link to her family; gone Secondary loss Losses suffered as a result of mother's death Confusion. Many questions Loss of family Secondary losses Aloneness Forced independence Change</p>

Appendix 7: connecting emerging themes for participants

Anne:

Context/environment of loss	Immediate effect	changing self	Subsequent psychological consequences	Needy;
<p>Conflict; Relationship, damage of father's denial; inability to cope; Silence (as misguided protection) (father's grief inability to help) Isolation, silence, loss of father, conflict; (no support) Sense of aloneness. Disregarded. Lack of love/support. Denial. supressed grief. overlooked; silence; disenfranchised, Aloneness/loss of connection/love? Denial/Silence; fathers defence against own emotional pain; denial/silence; too painful</p>	<p>Parentification End of childhood Loss of assumptive world loss of innocence; childhood Loss of family unit, father Survival; through protective coping mechanism (attempt to control); distraction, focus away from pain Forced into maturity (mother tasks); parentification; self as carer loss of safety loss of security</p> <p>Loss of future self (CHANGED)</p>	<p>Loss of confidence, loss of self-worth, self-esteem Loss of self-confidence (uncertainty) Loss of faith Loss of hope (belief in loss) loss of joy in life; ability to live in moment Loss of confidence, faith in life, happiness Loss of love Loss of trust Loss of hope, safety, security</p>	<p>Changing identity Aloneness untrusting Fearful worthless Anger resentful Cautious insecure Risk-averse Wistful Excessive worry fatalistic Unworthy Sadness Changed; different Uncertainty, preparation, self-protection Uncertainty of identity Self-blame Perceived vulnerability Disregarded invisible, disenfranchised unimportant Powerlessness; hopelessness Self-protective; Attempt to control (self-preparation) Controlling Inadequate Isolated hurt</p>	<p>Need for security, safety Need for control Need for self-protection (as coping/survival mech) (distancing, anticipating pain/loss); hypervigilance Need/yearning for mother; a 'known'; reconstructs imagined mother</p>

Non-finite losses	Ripple/pervasive effect	changing life philosophy	Healing	emerging positive aspects of transforming self
<p>Loss of relationship, past & future Loss of time/years/life; lost self Loss of potential Loss of trust (lack in life) Loss of happy memories Loss of knowing/ Relationship Loss of judgement Loss of role model, adviser Loss of secure parenting Loss of relationship with mother; (& future)absence</p>	<p>Compensates with children Loss of secure parenting loss of self as confident parent Preparation & protection (kids) shapes them Insecurity, uncertainty (parenting, role model) Insecurity pervasive to kids Ripple to kids (preparation & protection) Anxious parenting; perceived vulnerability Insecurity, lack of love; ripple to kids anxious parenting (prepares kids for her absence) Anxiety; her health & kids Anxiety (for kids when she dies)</p>	<p>Philosophy (insecure); inevitability of loss & pain; Philosophy of loss & abandonment Preparedness; self-protective Anticipation; protective; control insecurity; life philosophy (everything ends)</p> <p>Expectation of/anticipation of abandonment & loss & pain Anticipation; doom/gloom untrusting fearful</p>	<p>relationship (female) nurturing relationship</p> <p>comfort & solace (music)</p> <p>solace; counselling female role models Internal relationship with mother</p>	<p>Increased self-awareness</p> <p>Freedom to be self liberation Resilience without choice Independence Enhanced self-awareness Enhanced empathy Sense of acceptance Strength Found own way & self Security if strong</p>

Restriction, loss of freedom Loss of safety Loss (robbed) of self (cheated) Recurring loss of mother with events Losses; layered loss, non-finite loss Cheated, robbed of memories by loss	Uncertainty of influence on kids (loss of self as confident mother) Anxiety (as parent) Insecure parenting			Aloneness & struggle=independence
---	--	--	--	-----------------------------------

Reflective perception Self-reflection with kids childhood Clarity of understanding Understanding changes in self; transforming self Perceived vulnerability Sadness & loss for mother (for mother's losses) Wistful, sadness resignation to loss Reflective perception (clarity) of failure Ambivalence (feelings for mother) Reflective perception; clarity; rose tint removed, balance Realization, clarity of loss Sibling suffering & grief Denial. suppressed grief dissociation from; lost self. childhood self; Memories of the child (self as child) End of childhood	Relationships vulnerability lack of trust expectation of the worst low self-worth	Anxiety Anxiety (health/death) Anxiety; (ontological) Health anxiety of others panic attacks, self-harm Comfort in control; Self-destructive behaviour (control); Explicit coping mechanism (anorexia), (self-harm)	Important themes; numeration? Missing 'unknown' Sense of unknown, "gap in the pictures" Absence sense of fracture; family unit & self World shattered Damaged sense of being cheated by life/death; Cheated by untruth Cheated by death; robbed of memories victim of circumstance Suffering struggle Silence Changed Legacy ; lasting message (no permission to grieve) Many losses	Pervasive impact to offspring Ripple (kids). Her anxieties become kids anxieties Ripple effect; son's health anxiety Daughter's anxiety (illness phobic)
---	--	---	---	--

Kate:

Relationship impact	Immediate losses	Changing self	Psychological consequences	Yearning
Relationship; controlling Sibling bond; shared history; Shared sense of identity; common loss; bond of grief; unity in loss	<p>Loss of mother; (primal female) connection</p> <p>Loss of love & affection</p> <p>Low/loss of self-esteem, self-confidence</p> <p>Loss of trust</p> <p>Arrested development</p> <p>Loss of developmental step</p> <p>Insecure identity; uncertainty of self</p> <p>Sense of abandonment</p> <p>Loss of/shattered assumptive world</p> <p>Loss of safety & security</p> <p>Lost years. Lost time</p> <p>Missed developmental stage</p> <p>Changed identity; formative</p> <p>Raw hurt</p> <p>Parentification of father</p> <p>Silence; protective of father, fear of hurting father</p> <p>Caring role; assumed responsibilities;</p> <p>Loss of grandmother</p> <p>Loss of closure</p> <p>Indescribable pain;</p> <p>Change of role</p> <p>Low expectations of father</p> <p>No expectations</p>	<p>Low/loss self-worth</p> <p>Loss of self-esteem</p> <p>Loss of self-compassion</p> <p>Sense of being 'marked'</p> <p>Uncertain of self; insecure in identity/uncertain of true identity, real self</p> <p>Sense of different/misfit</p> <p>Loss of part of self; sense of incompleteness; broken</p> <p>Sense of insignificance/worthlessness</p> <p>Silence; fear of loss of father</p> <p>Sense of failure</p> <p>Loss of alternate identity, or part of identity</p> <p>Changed identity</p> <p>Loss of identity; loss of real self</p> <p>Cautious; Self-protective coping mech; caution; loss of trust</p>	<p>Sense of inadequacy/inferiority as not 'whole'</p> <p>Sense of aloneness</p> <p>Sense of vulnerability</p> <p>Low self-worth/self-esteem; Imposter syndrome</p> <p>Fragile</p> <p>Vulnerable; outward control (protective shell)</p> <p>Outward confidence; show of strength, control, inner uncertainty</p> <p>Sense of being untouchable/impenetrable</p> <p>Sense of something missing; incompleteness</p> <p>Continuing uncertainty (& of identity);</p> <p>Uncertain sense of self</p> <p>Overlooked; disregarded; invisible</p> <p>Sense of insignificance/worthlessness</p> <p>Insecurity; clinging to comfort & safety</p> <p>Familiarity with grief, pain, aloneness</p> <p>Grief remains disenfranchised; disregarded;</p> <p>Wistful sadness</p> <p>Fearful of; aloneness, isolation</p> <p>Lost, insecure; No sense of safety</p> <p>sadness</p> <p>Unimportant, invisible</p> <p>Sense of familiarity with grief</p> <p>Sense of injustice, unfairness</p> <p>Aware of own mortality;</p> <p>Self-blame</p> <p>Anxiety (enduring)</p> <p>Anxiety (others health & safety) No illness anxiety</p> <p>Ontological insecurity</p> <p>Death anxiety (others)</p> <p>Explicit coping mechanism; need for control; anorexia</p> <p>Smokes; self-destructive coping mechanism</p> <p>Self-destructive actions; compounding low self-worth</p> <p>Sense of vigilance, hyper alertness</p> <p>Anticipation of disappointment</p> <p>Difficulty in losing control</p> <p>Organised, Plans, controls, perfectionist</p> <p>Need for external definition</p> <p>Feels defined by role (emptiness)</p> <p>worry</p> <p>Sense of being adrift, needing direction</p>	<p>Yearning to know & understand the woman; fantasy element</p> <p>Yearning for mother; need to emulate</p> <p>Yearning for truth; cheated of truth</p> <p>Needing love, connection, affection/contact</p> <p>Yearning for comfort</p> <p>Need for control (others & self)</p> <p>Yearning for mother figure</p> <p>Yearning for understanding</p> <p>Need for security;</p> <p>need/desire to 'home-make'</p>

Recurring losses	Effect (on parenting)	Emerging ideology	Solace and comfort	Self-identified positives
Loss of adult relationship with mother Loss of 'knowing' her Loss of future Loss of role model Loss of 'link with past'; sense of disconnection Layered losses Loss of opportunity Non-finite Loss of self, ability (concentration) Loss of potential Loss of hopes, dreams Loss of academic success/achievement Loss of 'guide' mentor Non-finite hurt, sadness, loss Loss of grandparent for kids	Compensated as mother; loss of love; gave ++ love Strived to give; provide what she lacked Repair past; compensating for own loss, desire to redo/repair past vicariously Creating perfection (kids childhood) non-finite loss & hurt Controlled mothering, perfectionism Redo/repairs past Mothered by instinct	Lives life, seize the day Sense of adventure Gratitude Sense of control Sense of finiteness Plan, prepared (self-protective) Low expectation; anticipation of disappointment Fighter; expectation survival	Solace in pet Relationship support Solace/comfort in husband's connection to mother Comfort; meaningful existence Comfort; closeness with mother; sense of presence/connection Comfort in nature (safety & security in childhood reminders) Self-understanding=comfort mother-daughter bond recreated with granddaughter	Fearlessness Strength (forced); Taught/learned resilience Unafraid Gratitude Acceptance Enhanced empathy caring Enhanced self-awareness Empowered by self-understanding Emerging sense of self Found own way, self Influence on career

Reflection/hindsight	Mediating factors	Notable themes	Evolving Healing/repair
Sadness for broken self Reflective perception of magnitude of loss Reflective gratitude Realization with age Reflective musings; Self-awareness of change Acceptance resignation; Gratitude Sense of awareness; who would I have been Wistful sadness Reflective perception Evolving sense of self Awareness of effect Perspective; sadness for mother's loss Perception of non-finite hurt/loss Perception of sense of incompleteness; damaged, broken; stolen self Sadness as child & adult; her loss & mother's loss Life before and after; Clarity of memory; Child memories	Lost opportunity to grieve; disenfranchised; disregarded; overlooked father's stoicism/inability to cope/communicate Silence as coping/protective mech Cheated by untruth Silenced; gagged, suppressed Loss of father; "always somewhere else" Psychological loss; "distant" Shrouded in silence & secrets; Sense of confusion Sense of mystery; lack of honesty; communication Clear message given	Disadvantaged Struggle Sense of irreparable damage Sense of clinging on Survival CHANGE Learnt messages Incomplete, broken Something robbed/stolen Sense of unhealed; unfinished Legacy Enduring silence, reinforced message	Healing through relationship balance healing through security, stability, connection, caring for others Healing through motherhood; healed void; rebuilt lost family Recreated mother-child connection Healing through learning & perspective, experience Changing awareness; finding meaning (healing) Healing; self-understanding; meaning & spirituality; changing philosophy Healing self-worth Healing in close family connection; grown kids; sense of achievement of loved family Evolving completeness Acceptance; circle of life Healing; increasing self-worth Healing in meaningful work

Helen:

Contextual factors	Immediate effect	Anxiety	Manifestation/character/psyche	Control
<p>Incompetence of medics Grief exacerbated by mediating factor Robbed/cheated/stolen of goodbyes. Lost opportunity Silenced at home (too painful)</p> <p>Inability of father to cope inability of adults to cope Silence No permission to grieve Cheated, controlled Silence Cheated by untruth</p> <p>Not given permission to grieve</p>	<p>Loss assumptive/safe world Disbelief; shattered assumptions Loss of mother Loss of potential past End of childhood Loss of sister Loss of father Change Loss of safety Uncertainty Loss of future self Loss of future freedom Assumed mother's role/adult role Changed relationship with father Parentification, stepped up, obligation, increased responsibility, role reversal Loss of trust (in life) Loss of self, loss of innocence Parentification</p>	<p>health, genetic, death anxiety; insomnia Existential anxiety Ontological insecurity Excessive worry High expectations of self Loss of confidence; needs 'permission'; insecurity, uncertainty Safety (feels unsafe/insecure); impact of insecurity, shaped self 'Restricted' Fear of loss, aloneness; loss of security Fear of conflict; silence, so not to risk further loss Worry dread powerless</p>	<p>Uncertain of identity Sadness Disregarded People pleaser; fear of loss Isolation aloneness Uncertain Wistful angry insecure</p> <p>Loss of potential self; certainty of self Loss of identity, sense of self 'pleases' mother's memory</p> <p>Low self-worth Low self-esteem Fear; loss of safety Loss of trust High expectation; low self-esteem Self-blame</p> <p>Responsibility for father</p>	<p>Control & certainty (insecurity) preparation; protection; control; security Control; organised Control(brings sense of security)</p>

Non-Finite Losses	Ripple effect on offspring	Emerging self	Healing	Light from darkness; Emerging positive effect on transforming self	Need
<p>Loss of intimate relationship with mother Loss of adult relationship with mother Loss of role mode Loss of memories Loss of adviser Loss of freedom (organized & controlled) Loss of career Loss of potential Layered loss Loss of dreams, hopes Loss of belief in self Loss of security</p> <p>Loss of full/true identity' identity restricted Loss of time/stolen time/cheated</p>	<p>Ripple effect (son's anxiety) Ripple effect Loss of kids freedom,</p> <p>Ripple to grandchildren</p>	<p>Organization =control =prepared =protected</p> <p>Prepared, organized, perfection, control.</p> <p>Anticipates, prepared, fearful</p>	<p>Connection to lost self Mother's presence Solace in shared traits Solace in relationship Solace in finding memory Connection with others brings sense</p> <p>Security with strong female role model/ connection. Solace in connection (female relationship)</p>	<p>Caring Enhanced self-awareness of security Learned resilience Prepared strength Found own way, self in mothering? Acceptance; enhanced self-awareness</p>	<p>control/powerless Seeks approval/permission; loss of identity, uncertainty Need for information (control & preparation) Needs connection with others Need for self-protection in preparation Needy of relationships; self-protective, prepared Craves stability Needs reassurance of 'safety'; needs security "nice, calm, organized" (controlled) self-protective Needs to be needed. Yearning for connection with mother</p>

Reflective Perception	Relationship;	Numeration & language	Control	Pervasive effect as parent
<p> Learned resilience Identifies with lost self Loss of self (thro relationship) (failed self-protection) Emulated mother. Reflective perception; clarity, parentification Reflective perception Disassociated from loss Sadness for mother Remembers as a child Disassociated from loss Loss of time Loss of memories Loss of world Child self with father Co-dependent relationship with father 'pleasing' mother's memory Restriction for sense of safety </p>	<p> Relationship (ripple); abusive relationship, lack of self-worth, insecure identity </p>	<p> Huge Effect Change Ripple Effect struggle Unhealed Silenced Cheated Trauma Scarred Sense of lost self </p>	<p> Outward control/perfectionist, inward anxiety Organized=control Loss of safety (clings to people as a form of self-protection) Efforts=control Perfectionist; controlling, order control/coping mechs control her Control; unprepared before (not in control) </p>	<p> Fear of 'teaching him'; self-blame Anxious mothering Desire to protect kids; repair past? Desire to redo/repair past vicariously thro kids; give kids what she missed/lost (re-raise self) Compensating Preparing children for her death; protective Emulates mother Anxiety for kids </p>

Heidi:

Contextual/mediating Factors	Immediate effect	Altered self	Subsequent consequences & manifestations	Needy (insecure); Need for control
ripples; father; family silence Silenced. Loss of opportunity to grieve Mediating factor; close relationship Suppressed grief; disenfranchised grief. Disregarded Family taboo Disenfranchised; anger; conflict Controlled; loss of freedom of expression Mediating factor; loss of mother; loss of care giver family's poor coping system	Loss of assumptive world Gone End of childhood Disintegration of family Loss of safety/safe world Change of identity Loss of, security, innocence Loss of life potential Arrested development Loss of support Loss of love Loss of childhood Parentification Development stunted Arrested development Assumed mother's role Loss of link to family Loss of father; physical & emotional loss Loss of family Loss of sibling Loss of carer, homemaker Loss of extended family unit	Low self-esteem Self-blame Immaturity Low self-worth (disregarded) Loss of self. Feels Invisible. Feels unrecognised Loss of trust/faith/hope Gagged; fear of further loss Anger of father Uncertain of self	SAD (non-finite) Sense of anguish Unsafe, insecure Sense of isolation (recurring) Uncertainty of self/identity Aloneness Invisible unimportant Sense of abandonment Resentful (father) (& of non-finite loss) Non-finite enduring hurt Sense of indignation Vulnerability Protective wall Unhealed "60 years on" Pain Sense of restriction; Loss of freedom of emotion Silenced; fear of further loss (self-protection) Unanswered questions Sense of unfairness; been cheated (by era) Sense of unhealed Fragility Disregarded Invisible, unimportant Sadness; sense of unfairness Anger at silence & suppression Ontological insecurity	Yearning for family Yearning for security/love; Fantasy of security/secure life Envy; wistful fantasy Yearning/need to create safety, create family & connection Need to repair past/replace family/security Yearning for mother figure Sense of envy; fantasy Needy of mother

Non-finite losses	Ripple/pervasive effect (parenting)	Emerging Ideology/philosophy	Healing;	Light from darkness/emerging positive effects of transforming self
Non-finite loss; reminder Loss of adviser Loss of role model Loss of teacher Loss of adult relationship with mother Loss of religious faith/trust in god Loss of academic achievement & school attendance Layered loss (sister) Loss of history Loss of safety Loss of intimacy Loss of achievement Loss of potential future Loss of career Controlled; loss of freedom Loss of close connection Irreplaceable mother	Ripple effect; prepares kids Desire to redo/repair past vicariously Protection Ripple effect (kids) Desire to give kids what she lacked Ripple effect on children Immaturity Ill equipped for parenting Anxious parenting Low self-esteem (mothering)	Sense of precariousness of life; fragility Gratitude, value life, live in moment Fearful (of further loss) Fearful; sense of restriction	Richness; meaning & fulfillment Healing; satisfaction, need fulfilled. Connection Meaningful work/existence Healing; reconnection with father Healing; satisfaction in giving daughters what she lacked Healing in breaking silence; sense of being heard Healing; being loved, fulfilled Meaningful existence Sense of belonging Repair; love, acceptance, relationship Repaired self Found family, found self	solace in connection; Mother within self (internal relationship) Solace in connection with safe self Sense of immortality of mother Solace in enduring connection with mother Increasing/enhanced self-awareness with age gratitude. Value living in moment Existential awareness. Empathy & awareness for others caring Change in self; empathic connection with others Forced strength Growth & resiliency

Perception with age	Sibling connection	Important language & potential concepts	Anxiety	Realization
<p>Awareness of importance of 'formative years'</p> <p>Reflective clarity of reality & sadness; retrospective loss</p> <p>disassociated; age, innocence, naivety(increase with age)</p> <p>Sadness & acceptance</p> <p>Enhanced self-awareness</p> <p>Wistful sadness fantasy</p> <p>Vulnerability; awareness of mortality</p> <p>Uncertainty; sense of resignation</p> <p>Reminder of loss; mourning, sadness</p> <p>Regretful; awareness</p> <p>Wistful fantasy ideal</p> <p>resignation/acceptance/awareness of fragility</p> <p>Sense of before & after</p> <p>Envy of 'ideal childhood'</p> <p>Envy of mothers</p> <p>Grief alongside development</p> <p>increasing awareness of change</p> <p>Clarity with age</p> <p>Regretful sadness</p> <p>Sense of resignation of uncertainty</p> <p>Retrospective perception of mediating factors</p> <p>Regrets. Wistful</p> <p>Self as victim</p> <p>Clarity of memory</p> <p>"primitive link"</p> <p>Silence; fear of loss</p> <p>Reflection; taboo</p> <p>Difficulty adapting to change</p> <p>Increased self-awareness/understanding</p> <p>Sense of disconnection to family</p> <p>Certainty of self</p>	<p>Empathy for sister;</p> <p>Shared past;</p> <p>Sibling bond;</p> <p>shared trauma,</p> <p>Sibling link</p>	<p>Legacy</p> <p>Sense of uncharted territory</p> <p>enormous</p> <p>unhealed</p> <p>Cheated; robbed</p> <p>Struggle</p> <p>Change</p> <p>Shattered</p> <p>Fractured</p> <p>broken</p> <p>Damaged</p> <p>Continuing silence</p> <p>Strong messages</p> <p>Taboo</p> <p>dreadful</p>	<p>Worry (health & hospital anxiety) & depression</p> <p>Insomnia, panic attacks</p> <p>Sense of unfairness, cheated</p> <p>Fearful; sense of restriction</p> <p>Insecure (emotionally)</p> <p>Struggles to adapt</p> <p>Uncertainty of self</p> <p>Uncertain of motivation</p> <p>Fearful of hurt, further loss</p>	<p>Reflective perception of damage; awareness</p> <p>Sad acceptance of reality (mourning)</p> <p>Reflective perception</p> <p>Fractured. Broken</p> <p>Trauma emotional neglect</p> <p>Reflective of Neglect</p> <p>& Self-sacrifice</p> <p>Increasing awareness of loss</p>

Appendix 8: Master table of *potential* themes for the group

Super-ordinate themes	Sub-themes
A. Mediating factors	Loss of assumptive world/end of childhood Inability to cope of surviving parent Silence; suppression Disenfranchised grief Secondary losses Parentification
B. Emerging self	Enormity of loss & non-finite hurt Low self-worth/esteem; feelings of inadequacy Self-blame Anger Vulnerability/fragility Anxiety <ul style="list-style-type: none"> • Excessive worry • Fear • Feelings of abandonment • Health & death anxiety • Anxiety for others • Coping mechanisms Insecurity/loss of trust Need and yearning Sadness for self and mother Emerging ideology
D. Non-finite losses	Loss of role model

	Loss of adult relationship with mother Loss of academic achievement Loss of personal freedom Loss of potential self
E. Parenting	Anxious parenting Uncertain parenting Protective parenting Compensatory/vicarious parenting
F. Healing	Nurturing relationships Comfort & solace Continuing bond with mother Self-understanding
G. Positive aspects of emergent self	Enhanced empathy & caring Independence Strength and resilience Gratitude Peaceful/wistful reflection

Appendix 9: compendium of participant quotes for each potential theme

End of childhood; loss of assumptive world (safety); clarity

Anne: he just came and he said, "Mummy's gone," and that was it; I think it finished before she died. I think it (childhood) finished when she got ill, when she was, when she was really ill at home ... it wasn't supposed to be like that

Kate: it was just a huge, huge shock. This couldn't possibly be happening to me.

Helen: It was all really vivid... I remember vividly the funeral. I can remember what I was wearing. I can remember what people's faces were like. I can remember what I thought as we drove and saw the hearse, and I remember them slipping a bit with the coffin as they walked in. That was so vivid.

Heidi: it was like our lives were turned upside down. The death of a mother is horrendous. That world came crumbling down... because from that moment we didn't feel safe. We were insecure; it's not just the person that dies, it causes an explosion within the family. All the dynamics change. Everything changed; It was life-changing...

Inability of surviving parent to cope

Anne: his reaction was to not cope, to not cope at all... I was living on my own in the house because my dad didn't come back in from work; my dad was useless, he was useless and I think it took me until I was well into my 30's to realise how shockingly bad he was.

Kate: he didn't know how to talk about it and he never mentioned it again; it was almost too much for him to have to talk about

Helen: It was just me and my dad, and my dad started drinking to fill the void really.

Heidi: There was an element of neglect and selfishness on their part. It had a totally detrimental effect. The death of a mother is one thing and it's appalling and it's damaging and it's irreplaceable, especially at (that age), but I think that my dad didn't cope that well

Silence, suppression and lack of permission to grieve

Anne: I do remember my dad didn't talk to me, I do remember that because I remember shouting at him once and saying, "You don't talk to me anymore,"

Kate: Children had to be seen and not heard in my house; I couldn't talk to him about such things.

Helen: I still wanted to say things, but I wasn't allowed to say anything. I allowed myself to feel because I couldn't do it at home

Heidi: Very much a family that you don't talk about this and you don't talk about that... That was very detrimental to (sister) and I. she said to me, don't cry, you'll upset your grandmother

Disenfranchised grief

Anne: And then I went back to school the next day; he just thought and I think therefore I just thought it was being a teenager, it was being a horrible teenager. I went down to seven stone and dad didn't really notice that bit at all; I think the legacy of that was quite long in that it was,

I think the idea that you had to toughen up, that you had to kind of get over it, that you had to just cope.

Kate: I didn't have a role to play. It wasn't about me. (funeral). I was left out a lot

Helen: I think it was all because we didn't get the real story; we weren't allowed to say goodbye. We could just hold her hand, but we couldn't say anything to her

Heidi: and the way they were speaking we knew there was something wrong. In those days ...I don't think they appreciated how much children pick up; We'd not been told she'd died. The curtains were drawn... I knew what that meant. In those days, people closed curtains. If somebody died, they closed their curtain ... What was dreadful ... they're discussing her death. They were discussing how she was, how she died and he's discussing it and we're in the room...I remember it. I remember exactly what was said. They're actually discussing she had this symptom and I'm thinking ... they were discussing it over our heads. There was lack of sensitivity without any doubt whatsoever. How raw her death was and how it turned our lives upside down was never ever discussed. It was almost as though... it was their grief and not our grief, but their lives continued. Ours didn't. Ours stopped really with it.

Secondary losses (family etc)

Anne: I was living on my own in the house because my dad didn't come back in from work;

Kate: there was nothing; (father) "always somewhere else"; "bit distant"

Helen: they fell to pieces. My sister fell to pieces.

Heidi: within 2 years they weren't doing that.... I don't remember her once coming around to make meal; The most damaging was the way the family coped afterwards. There was lack of support, emotional and in all sorts of practical ways and that, I think, was the most damaging. We were left on our own. That is emotional and physical neglect; We were the victims. We were the true victims...It shouldn't have mattered what he was doing. What mattered was us. We mattered. The fact he wasn't there they could criticise, but we were the ones that mattered; When a mother dies you need practical support. You need somebody to cook the meals. You need somebody to clean the house. You need somebody to buy you school uniform.; When I needed a bra, I remember thinking ... I had an auntie up the road and her daughter was a similar age to me and we went out shopping and she got all those little things, but then I needed another one. I remember washing it and thinking I need another one. It's all those very personal issues which were not dealt with; mother. It's an irreplaceable relationship; I was very close to her

Parentification

Anne: I'd just get cross with dad because he wasn't, because he wasn't tidying up or ... because a lot of the housework ended up on me...So I did the housework, I looked after the garden

Kate: I stayed with him for two years and looked after him, cooked for him

Helen: I suddenly felt like the matriarch with my sister and my dad; I went home very regularly.

Heidi: 8; those years were not good years and in those years nobody within the family came around to do practical things like clean the house or make the dinner. We'd come home from school and make a meal...we were basically bringing ourselves up, which is horrendous. It

wasn't just her death. My dad changed and the house needed cleaning and it wasn't being cleaned. You would come in from school and make the dinner or you would light a fire.

5. Focus on emerging self

Enormity of loss & non-finite hurt (broken, shattered, damaged, survival etc)

Anne: so that kind of fractured something in me; (work) anxiety, yes, just really scared and everything was going wrong ... and then it was all horrible, it was all horrible and I really struggled with that; surviving without your mum and that's your normal is not having a mum; I kind of limped on like that

Kate: broken and incomplete ever since; it's been a struggle. I have struggled and I've clung on despite it all, yes. Trying to find my way through the mire, that's what I've been doing...

Helen: I dread each day. That's why I don't sleep well at night. I dread each day; I survived it, and I have

Heidi: The death of a mother is one thing and it's appalling and it's damaging and it's irreplaceable; It's amazing that X years on and at (age) it's still raw and it's still dreadful; Her death had massive implications for me in all sorts of ways; That hurt never truly goes away; Sad, yeah, it touches a nerve still. That's it, it touches a nerve which after all of these years is still there; It still hurts. It's still quite dreadful.

Low self-worth, low self-esteem; feelings of inadequacy (including relationships)

Anne: (**relationships**) I probably would still be limping on and expecting him to leave me; he told me from almost the get go that he, I was not going to be the woman he stayed with, that he was going to leave and I was accepting of that because people leave; I just hung on there, I kept hanging on and I kept hanging on, I just thought that was life and that was what happened and you lived with people and they might leave you; (**motherhood**) I don't think I would have coped with kids, I didn't think I was ready and then I thought that it would take me from them; (**self**) massively cautious and those kind of things and I follow, I'll follow someone else lead quite a big lot I think if someone decides that this is the right thing to do, I would be quite likely to go, "Okay let's do that then,"

Kate: (**self**) I've always felt, even though I'm quite well-qualified, every job I've had I've felt like an imposter, I'm not good enough; she thinks I've done terribly well. (She says) you're amazing. I think yes, thanks, you know, I don't believe it, but it doesn't matter because it's all relative, isn't it? I wanted to be like her (mother), but knew I couldn't be because I wasn't intelligent enough; he was with all these bright people... I had no concept of, no understanding of most of the things they were talking about, you know? But he loved me and that was okay; I'm appalled because I was such a needy person; it sort of mars you; I feel I've got no identity unless I'm doing something... if I'm not planning something..., I feel inadequate...

Helen: so that I could never ever feel like I'd failed; Sometimes I feel so engrossed in my own issues that I feel like I'm being a really bad friend; I want to be as good as I can be at anything. I always think I'm crap at that, crap at that; (**relationship**) I wanted my 25th silver wedding anniversary. I wanted a piece of silver to say yes ... I was living a lie really. I was feeling miserable. That was an abusive relationship really. .

Heidi: (**motherhood**) anxiety and I don't think I was a good mum. I think I was a child bringing up children; I'm probably brilliant, but sorting my own out is a slightly different ball game.

Self-blame

Anne: I didn't prepare myself so therefore I almost caused it as well so this is a, I don't know what the word is, a neurosis, but if I don't prepare myself then the bad thing will happen; (**parenting**) I worry, worry that I've passed this on somehow and it doesn't, he knows my mum died so for him mum's die, mum's can die and he knows that; I don't know how I make him stronger but I don't seem to be doing a good job of that

Kate: I'm appalled because I was such a needy person; it sort of mars you; part of you thinks, gosh, is it me? You know, am I causing this to happen to other people

Helen: With my mum I feel like I could have done more, even though I was only young, but I still feel like god I wish I; so that I could never ever feel like I'd failed (with dad)

Heidi: ---

Anger/unfairness

Anne: there were times when I just like, "You have to understand how lucky you are to have a mum ...you have to appreciate what your mum is doing for you."; but in a way it's helped me to see, not just how my mum might have felt but also to be honest the mistakes that were made and it was mistakes; you can say oh, you know, they didn't know how to deal with it or it was different then as much as you want, they failed, both my mother and my dad, failed to look after me and they shouldn't have

Kate: now I've got grandchildren and we're expected to help with the grandchildren, nobody ever helped me with my children, ever

Helen: I can't get over the fact that she didn't know she was dying, so she wasn't given the opportunity to say goodbye. I feel like she was robbed of that

Heidi: mother. It's an irreplaceable relationship. I was just X and I hadn't long started my periods, but I think that what I've always resented since ... I think the most damaging ... obviously, the most damaging thing is the death of mother at my age. The most damaging was the way the family coped afterwards. There was lack of support, emotional and in all sorts of practical ways and that, I think, was the most damaging; There were things that happened which shouldn't have happened; It's so different to how it is today. It's unbelievable; There was always that silence. There was always that resentment; People know how important it is to express grief, but in those days, it was withheld. There is no question about it, it was withheld. All these years have passed ...but that was damaging. You don't have to be bright to know that that was obviously damaging. That grief

Vulnerability/Fragility

Anne: everything was going wrong, there was a lot of hostility at work for various reasons, we had a partner wanted to leave and then it was all horrible, it was all horrible and I really struggled with that.

Kate: 6; because I was so vulnerable; Mentally not so strong, no; ever since then, I have felt just sort of broken, really. I've not been a whole person

Helen:

Heidi: I think possibly because of the insecurity and the way it leaves you, making you vulnerable; I had the need for family and could be over-emotional about certain things...I was more vulnerable, and I was more needy probably; I think I became slightly vulnerable moving out of my little safe world ...to an area where having a mother figure would have been very important to me; I'm over-emotional, find change hard; I think when that happens to you, you're left vulnerable. Where life hits you and something happens ...you don't cope so well because underneath all of that is the past and the fact that it has made you fragile in certain areas of life. That's the only way I can put it. It's made you more fragile. The impact of what happened to me all those years ago didn't equip me for life, put it that way. It certainly didn't equip me for bringing up children I think I was quite fragile. but I think that's how it makes you. You either become vulnerable, which I think I did, and fragile, or you become detached; it still surprises me... I don't become emotional because it is too far away, and I've got lots of other good things that have happened to me in my life. I've had far more good things than bad, but I am fragile, sensitive.

Anxiety

Excessive worry

Anne: (**parenting**) I worry, worry that I've passed this on somehow and it doesn't, he knows my mum died so for him mum's die, mum's can die, and he knows that

Kate: I worry a lot, and I plan a lot, a bit of a perfectionist; I worry about other people

Helen: I've always dreaded Sunday nights because I'm going back to work. I've always worried about work. I worry, and yet I do things and I think how the bloody hell am I doing these things; I remember having a conversation with myself thinking I just never worried. I never worried that she was going to die and, therefore, I taught myself to worry; I just fret needlessly

Heidi: I did always suffer from anxiety, no question about it; Anything which pushes you a bit, I was quite fragile probably, looking back now, but life carried on and then ... definitely depression

Fear

Anne: this fear of being out of my comfort, of being out of things I was comfortable doing; I will do everything to stop myself being afraid so I don't know if it's quite fearful of just risk averse

Kate: --

Helen: I don't like to feel I'm having conflict with people. It frightens me, all of that stuff. I like everything to be smooth. I can't cope with this situation.; I'd be frightened that it might go wrong if I did it; Why am I fretting to them about ... I just need to because I'm scared.

Heidi: for me reaching this age is so much longer than it was for mum and we've both lived so much longer obviously. I find it a bit scary; I think because my mother never became old really. She didn't become old and I have. I think it's hard for me to age because of that because you're going down this road and it's quite scary.

Abandonment anxiety

Anne: this is it, this is going to be what happens, this is the cruelty, I'm going to lose him so it's going to be him taken away from me; I just hung on there, I kept hanging on and I kept hanging on, kept thinking, I don't know if I did think he was going to stay, I just thought that

was life and that was what happened and you lived with people and they might leave you; he left, he, the abandonment happened again so I then crashed really badly and I started having panic attacks.

Kate: I can feel quite isolated; I was left on my own because I was working and I couldn't take six weeks off, could I? I was left in this house all on my own, and it wasn't a conscious thing, but I just stopped eating... perhaps abandoned, yes. And that feeling of, oh my god, I'm on my own, what do I do now? What do I do? I'm all on my own, I can't cope.

Helen: All I ever wanted was to be happily married like my mum and dad, and then it just didn't happen. That's what you want. That's what everybody does. I wanted my 25th silver wedding anniversary. I wanted a piece of silver to say yes ... I was living a lie really. I was feeling miserable. That was an abusive relationship really. .

Heidi: (preg leaving); I was absolutely broken. I thought it was horrific; why did my grandmother never come around? Why did this? Why did that?

Health/death anxiety

Anne: Well it doesn't matter because I'm going to be dead. I've got a lump and I'm going to be dead; She was X when she was diagnosed, she was (mother's age) and I'm (age), so that's, yes, that's significant, that's preying on my mind; somehow something will happen and I'm not going to get to ...the age she was when she died, somehow something will happen.

Kate: I think I've got an underlying anxiety all the time (not specifically health related)

Helen: There is a huge element of anxiety that this could happen to me. The same thing could happen. I'm paranoid about a little thing on my leg at the moment. I'm paranoid is that cancer. I go to the doctors so often; Anything, because it was X cancer, so anything... I've had genetic testing and my risk is higher than normal, but not massive; Yes, I am. Frightened of it (death)...

Heidi: I've always been very health conscious. If ...I got a migraine, it was going to be a brain tumour. In other words, I've had health anxiety. No question about that... dreadful health anxiety. I also think that's to do with the fact that your mother went in one day, I can still see her going in...I remember the day...I think that, obviously, hospitals are where you die.

Anxiety for others

Anne: I just go, you know, something I've found is going to kill me, something I've found is bad but recently it's extended to (husband) so if he, like he started getting headaches and I was like oh this is it, this is it, this is going to be what happens, this is the cruelty, I'm going to lose him so it's going to be him taken away from me

Kate: the children, gosh, especially when they go off on car journeys

Helen: You can't see your children ever stepping ... you don't ever want them to step off of the road into a bad place.

Heidi:

Intrinsic/extrinsic/self-destructive coping mechanisms

Anne: I started self-harming, not terribly, mostly burns ...and I took myself to the doctor and said, "I'm not coping,"; I became anorexic so I stopped eating all but one meal a day; I used to exercise for an hour every night, so I used to do squat thrusts and press ups and... got... a bit fit for about an hour every night and then so I kind of limped on like that.

Kate: it was a control thing, I realise that that was control, I needed...I couldn't cope with all this feeling, you know, totally isolated, so I had to control something, and I suppose that's what I did; I do smoke cigarettes though, and that's a bit self-destructive, isn't it; and I plan a lot, a bit of a perfectionist

Helen: I always struggle to sleep because I worry; I drive everybody crazy because I just have the tiniest detail... I worry that we won't be organised enough; Just because I feel that I'm in control. I think I felt like I was out of control with my mum, and I think it's just me having control of everything. At work the reason I do so many hours is because nothing can go wrong.

Heidi: and I started to suffer with anxiety badly or panic attacks or something awful, and I did start to suffer from panic attacks; Then I had anxiety sleeping. I was still fine, running the home and doing all the normal things, but I was becoming anxious and I wasn't sleeping very well at night.

Insecurity/Uncertainty/loss of trust

Anne: you can't trust anybody not to die, you can't, people, whatever you put your faith in, it just goes; (we) aren't married and it's partly that we, neither of us wanted to believe in something being forever... when we got together neither of us wanted to collectively believe in that anymore; There's nothing in trust, in trusting someone that can stop them from, stop you from losing them so why trust because nothing can stop them.

Kate: I don't know if that's intrinsically me or whether it's me as a result of that experience, I really don't; I'm a bit insecure in my identity, and I put on a good front; I feel I've got no identity unless I'm doing something... if I'm not planning something like that, I feel inadequate...

Helen: I jumped in there with both feet and got married just because I wanted to be secure. I needed to be near my dad.

Heidi: 7; I think possibly because of the insecurity and the way it leaves you, making you vulnerable; I think if your mother dies at X, it's going to make you a bit emotionally insecure; I think that from the moment she died, I didn't feel safe. I think that's the big thing. Even though life moved, and you had your own family, I think that that world where ... I that's the word, safe. That world where your mother was; I never confronted them because I probably felt an insecurity.

Need/Yearning (for security?)

Anne: I make myself safe, I will make myself safe and I will not push further; massively cautious; I would appear to be hugely confident but then I have to come home and retreat and bring all my borders in; I will do everything to stop myself being afraid so I don't know if it's quite fearful of just risk averse (laughter) just massively risk averse

Kate: just needing to have somebody to come and put their arms round you and tell you everything is going to be fine; I've always subconsciously or unconsciously liked older women friends... they are obviously mother figures, there's just no doubt about it.

Helen: I can't stand losing touch with people. Just weird. I just like to know that I've still got people. I don't like people to disappear; I don't know why I do it. I cling onto people; because I need to keep in contact with those people. I need to have them in my life. I suppose it's probably because I think if this happened then who could I turn to. I've got this huge safety net I build; He says why do you want to get married because he doesn't want to get married.

I do because I want that security; everything has got to be nice and calm and everything has got to be organised.

Heidi: you need a mother substitute. You need emotional support. You need somebody; I had the need for family and could be over-emotional about certain things...I was more vulnerable, and I was more needy probably

Enduring sadness for self and mother's loss

Anne: but in a way it's helped me to see, not just how my mum might have felt but also to be honest the mistakes that were made; it was almost like it was her sadness, it almost wasn't my sadness, it was like my mum's sadness; it is just this occasional emotional whack of that she should be here, that she's missing it, that's she's missing it and she'd have loved it.

Kate: She was in the prime of her life, she was X years old and I feel so sorry about that for her; sadness for her as well as for myself

Helen: I can't get over the fact that she didn't know she was dying, so she wasn't given the opportunity to say goodbye. I feel like she was robbed of that....; Especially when I got to that age. You know what it's like when you get to that age and you think if it had happened to me

Heidi: Sad, yeah, it touches a nerve still. That's it, it touches a nerve which after all of these years is still there; It still hurts. It's still quite dreadful; then you think I was that age. I was only that age. That's when going through that appears even more shocking

Emerging ideology

Anne: Nothing's forever; There's nothing in trust, in trusting someone that can stop... you from losing them so why trust because nothing can stop them; you can't trust anybody not to die, you can't, people, whatever you put your faith in, it just goes; I just thought that was life and that was what happened and you lived with people and they might leave you; I'm quite a fatalistic person but fate is malevolent so it's, I always thought, I remember writing this down in the diary, I will die young and I will never have children and I will always be alone.

Kate: If somebody wants to be friends with you, you think, yes, but are you going to be disappearing soon? Are you going to die on me or...? Obviously, it's not a conscious thought but I do approach gently, carefully; I have to comfort myself to say I'm happy with my lot, I've done fairly well under the circumstances and I've got to be grateful.

Helen: You just want to be in total control. You just want to be ... they'll say nothing like that can ever happen again. You can never be so unprepared for something; I'll never do it.... I'd be frightened that it might go wrong if I did it.

Heidi: I was frightened of making that life change and then regretting it; I think that we have very little control in life; We think we have, but we haven't. I think life is very fragile. It can change tomorrow, and it really is a case of getting your priorities right. I can do that now; I also value what I've got. What some people value as they get older is living in the moment. You value what you have now because you know how fragile we all are and our lives could change tomorrow. I'm like that now.

6. Focus on non-finite loss

Loss of role model/advisor

Anne: the only model I had really was my sister-in-law and my sister-in-law; I thought I'll do that, that seemed to be fine, I don't know anything else

Kate: I've always been seeking guidance.

Helen: Then thinking I don't think I've not real role model because I can't remember her. I just remember the odd bit of baking, and the fact that she did do all this toy library thing. I remember those as facts, but I've got nothing to copy; I do often wonder what should I doing here. I feel a bit out of control in that sense.

Heidi: In times of the children being ill, I didn't actually have anybody..., but on a practical level I didn't have a mother to say please come around...I've got a migraine, can you come around and help? I didn't have that, did I; There again, I had no mother figure to say to me it's not all romantic (marriage), you know. It's not all wonderful. Be careful. I'll tell you what (we) lacked, we lacked nurture. There was lack of nurture. I didn't have anybody to say hang on, be careful. It's not like this.

Loss of adult relationship with mother

Anne: I don't know what she was like. I don't know who she was; I didn't have her through kind of boyfriends or relationships or that kind of transitioning to college she wasn't there; there's missing as in yearning for someone, wanting them there, but there's also missing as in missing person - an absence. I think I feel the second meaning more than the first. She's missing from my life, and that makes me wonder about what life would be like with her there. But I don't yearn for her - because I never really knew her, so don't know what I'd be yearning for. She's missing more than I'm missing her.

Kate: wondering what she would have been like, you know, like now, for instance, if she was still alive, what would she be saying? What sort of relationship would I have with her, and I'd idealise that, of course. I think we'd have a perfect relationship, and of course it wouldn't necessarily be like that, so the best thing for me to do is to rejoice in the memory I've got of her and leave it there; In a way, I don't feel I knew her that well, you know? I only knew her as a child. I'd love to have got to know her as an adult.

Helen: there are times when I think, what would she say now. Would she approve of my relationship now? Would she approve of me living here and not being married? What would she think about me having got divorced?

Heidi: I never had an adult relationship with her; My mother never lived long enough to say to me when I was pregnant with you, this was how it was. I never had all of that history. All of that was lost ...it was X years since our mother died...so much was lost, and we lost so much.

Loss of academic/career/potential achievement

Anne: this fear of being out of my comfort, of being out of things I was comfortable doing. I make myself safe, I will make myself safe and I will not push further, ...that fills me with fear, the idea that you'd leave and travel; massively cautious and those kind of things and I follow, I'll follow someone else lead quite a big lot I think if someone decides that this is the right thing

to do, I would be quite likely to go, "Okay let's do that then,"; I would appear to be hugely confident but then I have to come home and retreat and bring all my borders in

Kate: I would have been a slightly different person. Maybe I'd have got better grades; So it was almost like I wanted to be like her, but knew I couldn't be because I wasn't intelligent enough. I didn't even get GCSEs, you know? And again, that may have been because of what happened.

Helen: I really wanted to go back and finish the degree and I really wanted to go and live in London to work, but I didn't think I could; but I kind of wish she'd told me. I wish she had said, right, shit is going to happen and you're going to go out there and live your live still. You're not going to stay home. Don't worry about things. You've got to go and live your life

Heidi: The work was harder at college. I left college after about three or four months. In other words, I couldn't settle. At the time, you're too young to process why. I look back now, and I know I was still grieving for my mother.

Loss of freedom/potential (self-limiting)

Anne: I put limits on what I do, I don't push myself as much as I could do, as I could have done; I'm an extrovert but fear, yes, the fear of what might happen puts these very tight rings around areas of my life

Kate: my boyfriend was studying x at University, and, you know, he was with all these bright people, sharing houses with lots of students who were studying things that I had no concept of, no understanding of most of the things they were talking about, you know? But he loved me and that was okay; I think I was, but you see, that's what I was saying, the lack of concentration, all those books, everywhere, I'd love to read them all but I can't concentrate for long enough.

Helen: I do feel like she would want me to look after my dad, but I kind of wish she'd told me. I wish she had said, right, shit is going to happen and you're going to go out there and live your live still. You're not going to stay home. Don't worry about things. You've got to go and live your life; I'll never do it... I'd be frightened that it might go wrong if I did it.

Heidi: I could have gone around the world with him, but I was having a baby. That was more important. Of course, I must have been mad, but that's how I felt, and I think that that is to do with nest building. That's to do with wanting your own little world.

Loss of potential self/alterd self (reflective who would I have been)(something missing)(arrested development)

Anne: I wonder if it's sort of almost who I am underneath, the kid that had nothing, none of this happened, I think I would have been quite extrovert, quite a bold person and then this thing happened and it stopped that, it stopped some elements of that but underneath there's quite a bold person.

Kate: like in my developmental stages, there's a bit missing; that's what I mean by missing out on a developmental step, because it's a huge thing going through adolescence, isn't it; ever since then, I have felt just sort of broken, really. I've not been a whole person; I think in a way it's changed me; it's almost like it needs to define me, because me, myself and I is just not...well, I don't know, yes, I guess it's that word incomplete again; I don't know if that's intrinsically me or whether it's me as a result of that experience, I really don't; I'm a bit insecure in my identity, and I put on a good front

Helen: I wanted to be a bit of a rebel, but I could never do it; had it not happened, where would my life have been. I would have probably not studied in X. I only studied there because it was close to home and I could back to see my dad... I don't know what I would have done.... My route would have been so different.... I would probably have had a little inner hippy come out in me; I think had my life not gone the way it went, I would never have married

Heidi: it affects aspects of your life because your mother isn't there. I think when that happens to you at that age you go back.... definitely the progression of becoming X, puberty, it definitely stunts part of something; I do think that when that trauma happens, part of you, no matter how mature you may have been since and dealt with all sorts of things, which obviously I have, part of you is still X

7. Focus on parenting

Anxious parenting:

Anne: I put myself in the situation frequently ... I've been worrying about something and I've felt about what do I do with the kids, how do I tell the kids, you know, I've been so convinced that I've got something like running through my head; I'm so, have been for years, so convinced that I will die, that I will become and my children will be as me; I worry, worry that I've passed this on somehow and it doesn't, he knows my mum died so for him mum's die, mum's can die and he knows that

Kate: no. I had a lot of confidence in being a mother

Helen: They say I'm really anxious. I know they say that. (son) will always say ... he will take the piss out of me because I say that I'm worried about everything... I've got to have this perfect family that nothing ever goes wrong. I know what goes on in life.

Heidi: When you come then to have your own children, unfortunately ... it wasn't that I wasn't a loving mum, but unfortunately, I think there is definitely an effect there. I think I wasn't as mature as perhaps I should have been, and I don't think I was a very good mother. I don't think I was a dreadful mother, but I'm a far better grandmother. I'm a brilliant grandmother, but I think I was very immature. Looking back, I don't think I could cope.

Uncertainty (not knowing)

Anne: I don't know how she parented, I don't really know, my dad doesn't really tell me. I've got no idea; I thought I'll do that, that seemed to be fine, I don't know anything else

Kate: I wasn't that good at playing, I was good at organising and doing their things, taking their things and helping with homework, reading bedtime stories, not that good at being silly and letting myself go; I feel *I don't know how* to be a grand-parent and to converse with them on their level. And yet I did feel I was a good parent to my own children.

Helen: --(emulated mum)

Heidi: When you come then to have your own children, unfortunately ... it wasn't that I wasn't a loving mum, but unfortunately, I think there is definitely an effect there. I think I wasn't as mature as perhaps I should have been ; that the idea of having a mother figure when you're having a baby must be absolutely fantastic and I didn't have that

Preparation and protection

Anne: You know mummy will love you and you know that daddy will look after you and if I'm not here it's not because I don't love you but you will be okay; I think they should do more, they should need to learn how to do stuff so maybe that's preparing them as well, they need to learn how to cook, they need to learn how to look after themselves because I had to and I was cooking Sunday dinners for five people when I was X years old;

Kate: --

Helen: I've always thought what if I die when they were little. You just want to be in total control. You just want to be ... they'll say nothing like that can ever happen again. You can never be so unprepared for something; I've written notes for (son)

Heidi: I had a bit of control. They did help in the house and I thought it was good that they did. I think that goes back to the fact that you didn't have anybody ... I had nobody mollycoddling me.

Compensatory / Repairs past vicariously

Anne: I'm desperate she's not weak and maybe, so maybe I am shaping her; I want her to feel strong, I want her to feel resilient, I want her to feel that she can deal with life

Kate: I think I probably did strive to make that, I was determined...yes, to give them lots of love because...(crying), thinking about it, yes, I wanted them to have so much love, yes, I did; I was very touchy-feely with my children; and to tell them all the time how wonderful they were and, yes, it's done them well, you know? I'm very proud of them. It's good to tell children they're good and able, isn't it?

Helen: I wanted it to be right, and I wanted to put the maximum in, and never be able to say that I hadn't done enough; The last thing I would have wanted was to cause any sort of disruption to a family unit. It happened to me. Why would I want to do that to my kids, but it became apparent that was actually happening anyway

Heidi: Looking back, I think I was a bit harsh. I wanted them to achieve what I hadn't. I wanted them to be more independent than me and to travel

8. Focus on Healing and Repair***Connection/bond with mother***

Anne: like she'd walked through me, like she moved through me, a sadness

Kate: I've developed her love for cigarettes and coffee; I do feel that she's part of me, absolutely; it's not until you're older that you appreciate all these things, isn't it? It's true, you know, I've had to wait until I'm X ...before I've had to come to this realisation that you are...some people say that when they look in the mirror, they see their mother, don't they? Or when they make a certain face, you might see your grandmother's face or you might start saying things to your children... and I found myself saying that to my grandchildren, and we are our parents and our siblings, we are.

Helen: I knew my mum would be saying get the hell out of there.; I feel like she's taught me that. I remember that within her

Heidi: I'm very into clothes. My mother was into clothes, I remember. That sounds silly... but she was into all these nice things and nice dresses. I think that when I buy something there's a connection there because my auntie used to say you're just like your mother. There are connections and they're very subtle, they're very private and you don't even know you're feeling them; I think we all have that spiritual need and I think when I think about my mother because there are photographs of her that I've got of her since my auntie died that she's kept, I think that, in a way, she will always live on in me because how can she not live on in me.

Nurturing relationships

Anne: (friend) she got me through, she just took over

Kate: we knew that we were going to be together forever; because we're different, we're a good partnership... my mother had met him so that was quite nice to know that; but we got on ever since that happened; and I had this shared identity; she was the only one with the answers.

Helen: (husband's mum) was lovely...she said something like you feel really bad because you haven't got a mum to take these (flowers) to. She said I'm your mum now. That was really nice... (sister-in-law) is lovely and reminds me of my aunt. She's fairly similar in age. She's lovely. She's a very together person... does loads of amazing things. She's just this amazing woman. I kind of like spending time with her. I look for whacky people as well... she's totally whacky and she's probably that free spirited side of me that I look for as well. She'll be like, will you just get pissed, please; friends mean a lot to me. I can't bear losing people, losing friends. That's why I stay on Facebook because I want to be in touch with people. I don't like losing people; I can't stand losing touch with people. Just weird. I just like to know that I've still got people. I don't like people to disappear

Heidi: brilliant for me because I formed relationships and friendships...nice intimate place to be... It became like family... You talk about all sorts of intimate things... it gave me a feeling of belonging and without me realising it, it became like family. It obviously fulfilled a need that I hadn't had; I realised that it help keep anxiety and depression at bay because I was mixing and talking every day

Comfort and solace

Anne: I found music, I found music really helpful; I got referred to the university counselling service ... and then I saw her throughout the rest of my time at college until I left and she, just she really kind of got me to start dealing with it

Kate: That was my way of grieving, really, and I just love the countryside and trees; I do believe that everything, you know, ashes to ashes, goes back into the earth. My love of nature means I've been a member of X for years; **motherhood:** As far as I was concerned, having a child was the best thing I'd done in my whole life; it's healed a void, yes, but I would have had children whatever, I'm sure. Yes, because then it becomes your family, isn't it? That's your centrepiece

Helen: I talk to people about it. I've talked about it because the anxiety has been such a huge problem, I've had to think about why I am like that; I think that's really helped me. I think being with the right person was part of the solution. Because everything had been so negative, to

be with somebody that sees the positive in things and says let's not worry about it until it happens

Heidi: There were certain songs that were in the hit parade and it makes me feel close to that part of my life when I was safe; I realised that it helped keep anxiety and depression at bay because I was mixing and talking every day; (GP) I think her mother had died when she was 17 so she had great empathy for me, had time for me; I've always found it very good for me to do that. In a way, I think I like to feel I belong there. There is some sort of a primitive link there because you do belong there; **Motherhood:** I'm here for my daughter when she needs help in a way I didn't. I had nobody, but I'm here for her in a way that nobody was for me... I enjoy the fact that I'm filling a void in her life; there for them in a way that my mother wasn't there for me for all the personal things

Self-understanding

Anne: stronger in a lot of ways, weaker in a lot of ways... Stronger, I understand, I think, people more who've been through this; there's an acceptance in it as well as it being a fearful way to be, I think there is an acceptance of reality now; I can pick it apart a little bit

Kate: because it reflects back on why I am like I am, in a way. You have to dig a bit deep, don't you; I realised ...the you is the essential you inside, and you've got to learn to value who you are essentially, and I'm learning to do that

Helen: I've talked about it because the anxiety has been such a huge problem, I've had to think about why I am like that.

Heidi: Anything which pushes you a bit, I was quite fragile probably, looking back now, but life carried on and then ... definitely depression; years later would you make that connection, but it has to be a connection (hosp); I think the damaging thing is it makes them ... because it's a ripple effect it's made me fragile. Her death had massive implications for me in all sorts of ways; When death comes early like that you can't process the death. You haven't got a clue about the implications and you can't articulate your feelings (then)

9. Focus on Positive Aspects:

Enhanced empathy and care for others

Anne: I understand, I think, people more who've been through this

Kate: having that happen to you has made me very empathetic to other people...I think having that happen to you has made me very empathetic to other people who may be in pain in any case, and I think that's what led me into doing (career)

Helen: She really cared about people. I feel like she's taught me that. I remember that within her. Maybe part of that is this thing about ... although I cling onto my friends it's because I do want to be there if something happened; I think I always cared about other people.

Heidi: The only thing that I will say that I have developed is empathy. I would say I probably have empathy for people who are going through difficult situations or this sort of thing; I think that the impact has been horrendous, but it's given me empathy; if somebody came in here with a problem, I could probably sort them out. I could probably say, hang on here ... people have said, god, you've made me feel great

Independence (freedom)

Anne: and I felt quite liberated that I just was like I'm just doing it this way, this feels right for me and I've parented differently; surviving without your mum and that's your normal is not having a mum; No, I don't need ... by the time she came around I didn't need that, I'd found ways to deal with those things, I didn't need a mum at that stage; I was not the mum I thought I was going to be (laughter) in the slightest

Kate: I had a lot of confidence being a mother

Helen: I absolutely loved it and felt that I was being as good a mum as I could be. I know it was challenging, but I was doing what I felt was right.

Heidi: ---

Inner strength, resilience

Anne: there's quite a big deep resilience and then there's a crack about health, my health, my kids' health; you don't rely on a mum to solve; I'd sorted myself out and I looked after myself; I'm stronger in myself in that I don't rely on a mum and I feel perfectly okay with doing things my way with the kids

Kate: these things make you very strong, I think because you've been so much pain, and again it's a very personal sort of pain, it's not the sort of pain you can describe, if you've been through pain like that, pain...nothing, you know? You can cope with it; I'm just strong, you know? I really am.

Helen: You can't give up. You've got to keep fighting every step of the way. Take your eye off of the ball and they can have one over on you; In a way, it gives me a good skill. Things tend to be well prepared for. I'm very organised; everything has to be just so

Heidi: I think that you need quite a strong woman to do that when you don't have a mother figure. Even in this day and age, the age I am now, I suppose deep down I'm still me, I want to still be me, but I'm slightly different as life makes

Gratitude

Kate: the best thing for me to do is to rejoice in the memory I've got of her and leave it there; I have to comfort myself to say I'm happy with my lot, I've done fairly well under the circumstances and I've got to be grateful.

Helen: 9; I used think I've got through this quite nicely. I survived it, and I have; When you get to X it all kind of ... I don't know, the pressure comes off of you a bit because I think you realise you've got halfway

Heidi: I also value what I've got. What some people value as they get older is living in the moment. You value what you have now because you know how fragile we all are and our lives could change tomorrow. I'm like that now.

Wistful Reflective perception (with age); peaceful reflection

Anne: there were times when I just like, "You have to understand how lucky you are to have a mum"; It's imaginary; "imagining how she would have enjoyed life with the kids"

Kate: it's not until you're older that you appreciate all these things, isn't it? It's true, you know, I've had to wait until I'm X ...before I've had to come to this realisation that you are...some

people say that when they look in the mirror they see their mother, don't they? we are our parents and our siblings, we are; it's wonderment, really. For example, on a beautiful sunny day in our little college, what would it be like if my mum came to visit?

Helen: I probably still don't believe it now. I still look for letters from her; It carries on through the generations; They can't even be free. I can't even let them experience it; It's not just how it's affected me. It's him as well. How will it affect his kids

Heidi: We all, to a point, will look back and see things slightly ... time can change your perspective of childhood sometimes, even if it's to say how wonderful it was, and you didn't think it was. Time affects all of us no matter what our childhood, but if you've had a childhood like I did, you do look back and instead of time making it easier, you can look back and think how horrendous that was; I think the damaging thing is it makes them ... because it's a ripple effect it's made me fragile. Her death had massive implications for me in all sorts of ways; I do think to have had her around until she was in her 80s would have been a gift. It would have been fantastic. You know that personally. It would have been fantastic, and I am jealous sometimes of people who have a mum

Appendix 10: final master table of themes for the group

Super-ordinate themes	Sub-themes
A. Mediating factors	Inability to cope of surviving parent Silence; suppression Disenfranchised grief
B. Psychological consequences	Unhealed hurt Low self-worth/esteem; feelings of inadequacy Anger Insecurity Anxiety <ul style="list-style-type: none"> Excessive worry Health & death anxiety Coping mechanisms Need and yearning Sadness for self and mother
C. Non-finite losses	Loss of adult relationship with mother Loss of academic achievement Loss of personal freedom Loss of potential self
D. Parenting	Anxious parenting Uncertain parenting Prepared & protective parenting Compensatory/vicarious parenting

	Generational effect
E. Positive Aspects of emergent self	Healing Continuing bond with mother Self-understanding Enhanced empathy & caring Strength and resilience